| Fill in this information to identify your case: | | |
|---|-------------------------------|-------------------|
| United States Bankruptcy Court for the: | | |
| MIDDLE DISTRICT OF FLORIDA | | |
| Case number (if known) | Chapter you are filing under: | |
| | ■ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if amende |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | rt 1: | Identify Yourself | | |
|-----|--------------------|---|--|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | your | e the name that is on government-issued are identification (for | Christopher First name | First name |
| | | nple, your driver's use or passport). | Michael | |
| | | | Middle name | Middle name |
| | | g your picture | Cordes | |
| | | tification to your ting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | | other names you have d in the last 8 years | | |
| | | ide your married or den names. | | |
| 3. | you num Indi | y the last 4 digits of r Social Security aber or federal vidual Taxpayer atification number | xxx-xx-5884 | |

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Debtor 1 Christopher Michael Cordes

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) EINs | ☐ I have not used any business name or EINs. Business name(s) EINs |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 360 24th St NW Apt 631 Winter Haven, FL 33880 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | Polk County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for | Check one: | Check one: |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

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Case number (if known)

| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | |
|-----|---|---|--------------------|--|--|-------------------|--|
| | choosing to file under | ■ Chapte | er 7 | | | | |
| | | ☐ Chapte | er 11 | | | | |
| | | ☐ Chapte | er 12 | | | | |
| | | ☐ Chapte | er 13 | | | | |
| 8. | How you will pay the fee | abo orde | ut how yer. If you | ou may pay. Typically, if you are paying the | e check with the clerk's office in your local court fee yourself, you may pay with cash, cashier's c ir behalf, your attorney may pay with a credit car | heck, or money | |
| | | | | | s option, sign and attach the Application for Indiv | iduals to Pay | |
| | | ☐ I red | quest the | uired to, waive your fee, and may do so on | option only if you are filing for Chapter 7. By law y if your income is less than 150% of the official | poverty line that | |
| | | | | | fee in installments). If you choose this option, y (Official Form 103B) and file it with your petition | | |
| 9. | Have you filed for bankruptcy within the last 8 years? | ■ No. | | | | | |
| | • | | District | When | Case number | | |
| | | | District | When | Casa number | | |
| | | | District | When | Case number | | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | | |
| | | | Debtor | | Relationship to you | | |
| | | | District | When | Case number, if known | | |
| | | | Debtor | | Relationship to you | | |
| | | | District | When | Case number, if known | | |
| 11. | Do you rent your | □ No. | Go to | line 12. | | | |
| | residence? | Yes. | Has y | our landlord obtained an eviction judgment | against you? | | |
| | | | | No. On the Provide | | | |
| | | | | No. Go to line 12. | | | |

Debtor 1 Christopher Michael Cordes

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| Deb | otor 1 Christopher Micha | ael Corde | es | Case number (if known) |
|-----|---|------------------------------------|---|---|
| | | | | |
| Par | t 3: Report About Any Bu | ısinesses | You Own as a Sole Proprieto | r |
| 12. | Are you a sole proprietor of any full- or part-time business? | □ No. | Go to Part 4. | |
| | | Yes. | Name and location of busin | ess |
| | A sole proprietorship is a | | | |
| | business you operate as an individual, and is not a | | Chris Cordes Consulti | ng |
| | separate legal entity such as a corporation, partnership, or LLC. | | Name of business, if any | |
| | If you have more than one | | 360 24th St NW Winter Haven, FL 3388 | n |
| | sole proprietorship, use a separate sheet and attach | | Number, Street, City, State | |
| | it to this petition. | | Check the appropriate box | |
| | | | ☐ Health Care Busine | ss (as defined in 11 U.S.C. § 101(27A)) |
| | | | ☐ Single Asset Real E | state (as defined in 11 U.S.C. § 101(51B)) |
| | | | ☐ Stockbroker (as def | ined in 11 U.S.C. § 101(53A)) |
| | | | ☐ Commodity Broker | (as defined in 11 U.S.C. § 101(6)) |
| | | | None of the above | |
| | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadline operation in 11 U.S | s. If you indicate that you are a as, cash-flow statement, and fee c.C. 1116(1)(B). | ourt must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure |
| | For a definition of small | No. | I am not filing under Chapte | er 11. |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Chapter 1 Code. | I, but I am NOT a small business debtor according to the definition in the Bankruptcy |
| | | ☐ Yes. | I am filing under Chapter 1 | I and I am a small business debtor according to the definition in the Bankruptcy Code. |
| Par | t 4: Report if You Own or | Have Any | Hazardous Property or Any | Property That Needs Immediate Attention |
| 14. | Do you own or have any | ■ No. | | |
| | property that poses or is alleged to pose a threat of imminent and identifiable hazard to | ☐ Yes. | What is the hazard? | |
| | public health or safety? Or do you own any property that needs immediate attention? | | If immediate attention is needed, why is it needed? | |
| | | | _ | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is the property? | |
| | | | 7 | Number, Street, City, State & Zip Code |
| | | | | |
| | | | | |

Debtor 1 Christopher Michael Cordes

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Deb | otor 1 Christopher Micha | ael Corde | s | | Case number | er (if known) |
|-----|--|-----------------------|--|-------------------------|---|---|
| Par | t 6: Answer These Quest | ions for Re | eporting Purposes | | | |
| 16. | What kind of debts do you have? | 16a. | Are your debts primarily of individual primarily for a per | | | ined in 11 U.S.C. § 101(8) as "incurred by an |
| | | | ☐ No. Go to line 16b. | | | |
| | | | Yes. Go to line 17. | | | |
| | | 16b. | Are your debts primarily to money for a business or inv | | | |
| | | | ☐ No. Go to line 16c. | | | |
| | | | ☐ Yes. Go to line 17. | | | |
| | | 16c. | State the type of debts you | owe that are not cons | umer debts or busines | ss debts |
| | | | | | | |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapte | er 7. Go to line 18. | | |
| | Do you estimate that after any exempt property is excluded and | Yes. | I am filing under Chapter 7. are paid that funds will be a | | | perty is excluded and administrative expenses ? |
| | administrative expenses | | ■ No | | | |
| | are paid that funds will be available for | | □Yes | | | |
| | distribution to unsecured creditors? | | | | | |
| 18. | How many Creditors do | ■ 1-49 | | 1 ,000-5,00 | 00 | ☐ 25,001-50,000 |
| | you estimate that you owe? | □ 50-99 | | 5001-10,0 0 | 00 | 5 0,001-100,000 |
| | | 100-19 | · · | □ 10,001-25, | ,000 | ☐ More than100,000 |
| | | □ 200-99 | 99 | | | |
| 19. | How much do you estimate your assets to | □ \$0 - \$ <u>\$</u> | 50,000 | | 1 - \$10 million | ☐ \$500,000,001 - \$1 billion |
| | be worth? | | 01 - \$100,000 | | 01 - \$50 million 01 - \$100 million | ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion |
| | | | 001 - \$500,000 001 - \$1 million | | 001 - \$500 million | ☐ More than \$50 billion |
| 20. | How much do you | □ \$0 - \$9 | 50,000 | □ \$1,000,00° | 1 - \$10 million | ☐ \$500,000,001 - \$1 billion |
| | estimate your liabilities to be? | \$50,0 | 01 - \$100,000 | | 01 - \$50 million | □ \$1,000,000,001 - \$10 billion |
| | | | 001 - \$500,000 | | 01 - \$100 million 001 - \$500 million | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion |
| | | □ \$500,0 | 001 - \$1 million | — \$100,000, | | |
| Par | t 7: Sign Below | | | | | |
| For | you | I have ex | amined this petition, and I de | eclare under penalty of | f perjury that the inform | mation provided is true and correct. |
| | | | | | | , under Chapter 7, 11,12, or 13 of title 11, noose to proceed under Chapter 7. |
| | | | ney represents me and I did t, I have obtained and read t | | | ot an attorney to help me fill out this |
| | | I request | relief in accordance with the | chapter of title 11, Un | ited States Code, spe | cified in this petition. |
| | | bankrupto and 3571 | cy case can result in fines up | to \$250,000, or impris | | or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519, |
| | | Christo | stopher Michael Cordes oher Michael Cordes of Debtor 1 | | Signature of Debto | or 2 |
| | | Executed | | | Executed on | I / DD / WWW |
| | | | MM / DD / YYYY | | MIV | 1/DD/YYYY |

| | Case 8:19-0K-00355-MGW | Filed 01/16/19 | Page 7 01 57 |
|--|---|---------------------------|--|
| Debtor 1 Christopher Mic | chael Cordes | Case | number (if known) |
| | | | |
| For your attorney, if you are represented by one | I, the attorney for the debtor(s) named in this petitic under Chapter 7, 11, 12, or 13 of title 11, United Stafor which the person is eligible. I also certify that I I | ates Code, and have exp | plained the relief available under each chapter |
| If you are not represented b an attorney, you do not need to file this page. | | ify that I have no knowle | dge after an inquiry that the information in the |
| | /s/ David Wilson IV | Date | January 16, 2019 |
| | Signature of Attorney for Debtor | | MM / DD / YYYY |
| | David Wilson IV 0103204 Printed name | | |
| | The Wilson Advocacy Group, P.A. | | |
| | Firm name | | |
| | P.O. Box 3142 | | |
| | Winter Haven, FL 33885 | | |
| | Number, Street, City, State & ZIP Code | | |

Email address

Contact phone **8634018155**

0103204 FL Bar number & State

info@wilsonadvocacygroup.com

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| Fill | in this information | on to identify your o | case: | | | |
|--------|-----------------------------|--|--|--|------------|------------------------------------|
| | | Christopher Mich | | | | |
| | F | irst Name | Middle Name | Last Name | | |
| | otor 2 use if, filing) F | irst Name | Middle Name | Last Name | | |
| Uni | ted States Bankru | ptcy Court for the: | MIDDLE DISTRICT OF F | FLORIDA | | |
| Cas | se number | | | | | |
| (if kn | own) | | | | _ | eck if this is an nended filing |
| | | | | | | g |
| Of | ficial Form | 106Sum | | | | |
| | | | and Liabilities an | d Certain Statistical Information | | 12/15 |
| info | rmation. Fill out a | all of your schedule | es first; then complete the | are filing together, both are equally responsible for information on this form. If you are filing amend the box at the top of this page. | | |
| Par | t 1: Summarize | e Your Assets | | | | |
| | | | | | | r assets ue of what you own |
| 1. | Schedule A/B: I | Property (Official Fo | orm 106A/B) | | \$ | 0.00 |
| | | | | | \$ | 83,992.80 |
| | 1c. Copy line 63 | , Total of all property | on Schedule A/B | | \$ | 83,992.80 |
| Par | t 2: Summarize | e Your Liabilities | | | _ | |
| | · _ · _ <u> </u> | | | | You | r liabilities |
| | | | | | | ount you owe |
| 2. | | | aims Secured by Property (nn A, Amount of claim, at th | (Official Form 106D) ne bottom of the last page of Part 1 of Schedule D | \$_ | 12,385.09 |
| 3. | | | Unsecured Claims (Official | | \$ | 0.00 |
| | ., | | , | s) from line 6e of Schedule E/Faims) from line 6j of Schedule E/F | \$ _ \$ | 40,013.33 |
| | ов. Сору ило ю | | - (nonphoney unboodred of | | <u> </u> | 40,013.33 |
| | | | | Your total liabilities | \$ | 52,398.42 |
| Par | t 3: Summarize | e Your Income and | Expenses | | | |
| 4. | Schedule I: You | r Income (Official Fo | rm 106l) | | _ | 2 002 20 |
| _ | | • | | l | \$_ | 2,863.20 |
| 5. | | ur Expenses (Official hly expenses from lir | | | \$_ | 2,891.52 |
| Par | t 4: Answer Th | nese Questions for | Administrative and Statis | stical Records | | |
| 6. | | | er Chapters 7, 11, or 13? on this part of the form. Ch | eck this box and submit this form to the court with yo | ur other | schedules. |
| 7. | ■ Yes What kind of de | ebt do you have? | | | | |
| | | | | ebts are those "incurred by an individual primarily for of statistical purposes. 28 U.S.C. § 159. | a persoi | nal, family, or |
| | | s are not primarily of the schedule of the sch | | e nothing to report on this part of the form. Check this | s box an | d submit this form to |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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| Debtor 1 | Christop | her Michae | Cordes |
|----------|----------|------------|--------|
|----------|----------|------------|--------|

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,890.86

\$

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$0. | 00_ |

| Fill in | n this information to identify your case | and this filing: | | |
|-----------------------|---|---|--|---------------------------------------|
| Debto | | | | |
| Debto | First Name | Middle Name Last Name | | |
| | ee, if filing) First Name | Middle Name Last Name | | |
| Unite | d States Bankruptcy Court for the: MID | DLE DISTRICT OF FLORIDA | | |
| Case | number | | | ☐ Check if this is an |
| Juoc | | | | amended filing |
| | | | | |
| Offi | cial Form 106A/B | | | |
| | hedule A/B: Propert | ty | | 12/15 |
| In each | h category, separately list and describe item | s. List an asset only once. If an asset fits in more than o | | |
| inform | | possible. If two married people are filing together, both a arate sheet to this form. On the top of any additional pag | | |
| Part 1 | : Describe Each Residence, Building, Land | d, or Other Real Estate You Own or Have an Interest In | | |
| 1. Do <u>y</u> | you own or have any legal or equitable inter | est in any residence, building, land, or similar property? | | |
| I | No. Go to Part 2. | | | |
| | Yes. Where is the property? | | | |
| Part 2 | Describe Your Vehicles | | | |
| | | | | |
| 3. Ca l | | vehicles, motorcycles | | |
| | | | Do not deduct secured cla | nime or exemptions. But |
| 3.1 | Make: Honda | Who has an interest in the property? Check one | the amount of any secure | d claims on <i>Schedule D:</i> |
| | Model: VTX1300S Year: 2004 | ■ Debtor 1 only | Creditors Who Have Clair | ns Secured by Property. |
| | Year: 2004 Approximate mileage: 60,000 | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| | Other information: | ☐ At least one of the debtors and another | | , , |
| | VIN# 1HFSC52024A103212 NADA Low Retail Value | ☐ Check if this is community property (see instructions) | \$1,000.00 | \$1,000.00 |
| 3.2 | _{Make:} Kia | Who has an interest in the property? Check one | Do not deduct secured cla | aims or exemptions. Put |
| 5.2 | Model: Soul+ | Debtor 1 only | the amount of any secure Creditors Who Have Clair | |
| | Year: 2014 | Debtor 2 only | Current value of the | Current value of the |
| | Approximate mileage: 112000 | ☐ Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | Other information: | ☐ At least one of the debtors and another | | |
| | VIN# KNDJP3A55E7075514 NADA Rough Value | | \$7,500.00 | \$7,500.00 |
| | | ☐ Check if this is community property | | ψ.,σσσ.σσ |
| | NADA Rougii Value | (see instructions) | | |

Official Form 106A/B Schedule A/B: Property page 1

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| Debtor 1 Christopher Michael Cordes | Case number (if known) | |
|---|-------------------------------------|---|
| 5 Add the dollar value of the portion you own for all of your entries from Part 2, in pages you have attached for Part 2. Write that number here | | \$8,500.00 |
| Part 3: Describe Your Personal and Household Items | | |
| Do you own or have any legal or equitable interest in any of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No | | |
| Yes. Describe | | |
| Household: Bed, Couch, Computer desk, Storage | e rack | \$1,000.00 |
| 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; compuincluding cell phones, cameras, media players, games □ No ■ Yes. Describe | iters, printers, scanners; music co | llections; electronic devices |
| Electronics: 2 TV's 50" and 32" (approx 5 yrs old) |). Lanton XBox | |
| game console | ,, _aptop, , x_ox | \$500.00 |
| other collections, memorabilia, collectibles No Yes. Describe 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool musical instruments No Yes. Describe 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe Firearms: Taurus G2C 9mm Handgun | tables, golf clubs, skis; canoes ar | nd kayaks; carpentry tools; |
| 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe Clothes: clothing for self and son, work uniforms school uniforms for son, work shoes/boots | s for self, and | \$150.00 |
| SCHOOLUHIIOHIIS TOLSON, WOLK SHOES/DOORS | | Ψ100.00 |
| 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, he No Yes. Describe 13. Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe | irloom jewelry, watches, gems, go | old, silver |
| Official Form 106A/B Schedule A/B: Property | | page 2 |

| Debtor 1 | Christopher Michael Cordes | Case number (if known) | |
|---------------|---|---|---|
| ■ No | | t already list, including any health aids you did not list | |
| ☐ Yes | :. Give specific information | | |
| | the dollar value of all of your entries from Part Part 3. Write that number here | 3, including any entries for pages you have attached | \$1,800.00 |
| Part 4: | escribe Your Financial Assets | | |
| | own or have any legal or equitable interest in an | ny of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ■ No | nples: Money you have in your wallet, in your home | e, in a safe deposit box, and on hand when you file your petiti | on |
| | sits of money nples: Checking, savings, or other financial accoun institutions. If you have multiple accounts wi | nts; certificates of deposit; shares in credit unions, brokerage ith the same institution, list each. | houses, and other similar |
| ■ Yes | 3 | Institution name: | |
| | 17.1. Checking | Checking Account: SunTrust Acct# 1111 | \$220.16 |
| | 17.2. | Savings Account: SubTrust Acct# 1145 | \$0.50 |
| _Exar | s, mutual funds, or publicly traded stocks nples: Bond funds, investment accounts with broke | erage firms, money market accounts | |
| □ No ■ Yes | Institution or issuer nar | me: | |
| _ 100 | | : MoneyLion Mobile App | \$120.00 |
| | ACCI# 0940 | | |
| joint | oublicly traded stock and interests in incorpora venture | nted and unincorporated businesses, including an interes | st in an LLC, partnership, and |
| ■ No | Cive enecific information about them | | |
| □ res | s. Give specific information about them Name of entity: | % of ownership: | |
| Nego | rnment and corporate bonds and other negotia bitable instruments include personal checks, cashie negotiable instruments are those you cannot transi | ers' checks, promissory notes, and money orders. | |
| ■ No | | | |
| ⊔ Yes | s. Give specific information about them Issuer name: | | |
| | ement or pension accounts hples: Interests in IRA, ERISA, Keogh, 401(k), 403 | (b), thrift savings accounts, or other pension or profit-sharing | plans |
| ■ Yes | s. List each account separately. Type of account: | Institution name: | |

Official Form 106A/B Schedule A/B: Property page 3

| D | ebtor 1 Christop | her Michael Cordes | | Case number (if known) | |
|-----|---|---|--|----------------------------|---|
| | | 423(b) Plan | Retirement: Sodium Sharew offered by my employer. I co match, but i can not touch t yrs before getting vestment | ontribute and they | \$308.00 |
| | | 401(k) | Legoland | | \$64.80 |
| 22 | | nused deposits you have mad | le so that you may continue service or use fro ent, public utilities (electric, gas, water), telec | | s, or others |
| | Yes | | Institution name or individual: | | |
| | | Rent | Security Deposit: Security Dep | | \$300.00 |
| 23 | . Annuities (A contra | act for a periodic payment of n | noney to you, either for life or for a number of | years) | |
| | Yes | Issuer name and description | n. | | |
| 24 | . Interests in an educ 26 U.S.C. §§ 530(b) | cation IRA, in an account in (1), 529A(b), and 529(b)(1). | a qualified ABLE program, or under a qua | lified state tuition prog | ram. |
| | ■ No □ Yes | Institution name and descri | ption. Separately file the records of any interest | ests.11 U.S.C. § 521(c): | |
| 25 | . Trusts, equitable o | or future interests in propert | ty (other than anything listed in line 1), and | I rights or powers exer | cisable for your benefit |
| | ☐ Yes. Give specifi | c information about them | | | |
| 26 | Examples: Internet | | s, and other intellectual property occeds from royalties and licensing agreemen | nts | |
| | ■ No □ Yes. Give specifi | c information about them | | | |
| 27 | Licenses, franchis Examples: Building | es, and other general intan | gibles cooperative association holdings, liquor licen | ses, professional licenses | ; |
| | ■ No □ Yes. Give specifi | c information about them | | | |
| М | oney or property ow | | | | Current value of the |
| 141 | oney or property ow | red to you! | | | portion you own? Do not deduct secured claims or exemptions. |
| 28 | . Tax refunds owed ☐ No | to you | | | |
| | Yes. Give specific | c information about them, inclu | uding whether you already filed the returns ar | nd the tax years | |
| | | | | 7 | |
| | | Antic | ipated 2018 Tax Refund | Federal | \$2,679.34 |
| 29 | . Family support | | | | |
| _0 | Examples: Past du | e or lump sum alimony, spous | sal support, child support, maintenance, divor | ce settlement, property s | ettlement |
| | ■ No □ Yes. Give specific | c information | | | |

| D | Debtor 1 Christopher Michael Cordes | Case number (if known) | |
|-----|--|--|----------------------------|
| 30 | Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits; unpaid loans you made to someone else | fits, sick pay, vacation pay, workers' compe | nsation, Social Security |
| | ■ No □ Yes. Give specific information | | |
| | | | |
| 31 | Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (H: □ No | ISA); credit, homeowner's, or renter's insurar | nce |
| | Yes. Name the insurance company of each policy and list its value. Company name: | Beneficiary: | Surrender or refund value: |
| | Aetna: Voluntary Life Insurance Policy #Unknown Policy provided through employer | Brayden Cordes | \$70,000.00 |
| 32 | 2. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life inst someone has died. No Yes. Give specific information | | eive property because |
| 33 | Claims against third parties, whether or not you have filed a lawsuit Examples: Accidents, employment disputes, insurance claims, or rights t No | | |
| | Yes. Describe each claim | | |
| 34 | Description Description ■ No | counterclaims of the debtor and rights to | set off claims |
| | ☐ Yes. Describe each claim | | |
| 35 | 5. Any financial assets you did not already list | | |
| | ■ No | | |
| | ☐ Yes. Give specific information | | |
| 36 | Add the dollar value of all of your entries from Part 4, including any for Part 4. Write that number here | , , , | \$73,692.80 |
| Pa | art 5: Describe Any Business-Related Property You Own or Have an Interest In. | n. List any real estate in Part 1. | |
| 37. | Do you own or have any legal or equitable interest in any business-related pro | operty? | |
| | No. Go to Part 6. | | |
| | ☐ Yes. Go to line 38. | | |
| Pa | art 6: Describe Any Farm- and Commercial Fishing-Related Property You Own If you own or have an interest in farmland, list it in Part 1. | or Have an Interest In. | |
| 46 | 6. Do you own or have any legal or equitable interest in any farm- or co | ommercial fishing-related property? | |
| | No. Go to Part 7. | | |
| | ☐ Yes. Go to line 47. | | |
| Pa | Describe All Property You Own or Have an Interest in That You Did | Not List Above | |
| 53 | Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership | | |
| | ■ No | | |
| | ☐ Yes. Give specific information | | |

Official Form 106A/B Schedule A/B: Property page 5

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| Debtor 1 Christopher Michael Cordes | | Case number (if known) | |
|--|---------------|------------------------------|-------------|
| 54. Add the dollar value of all of your entries from Part 7. Write tha | t number here | | \$0.00 |
| Part 8: List the Totals of Each Part of this Form | | | |
| 55. Part 1: Total real estate, line 2 | | | \$0.00 |
| 56. Part 2: Total vehicles, line 5 | \$8,500.00 | | |
| 57. Part 3: Total personal and household items, line 15 | \$1,800.00 | | |
| 58. Part 4: Total financial assets, line 36 | \$73,692.80 | | |
| 59. Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. Part 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. Total personal property. Add lines 56 through 61 | \$83,992.80 | Copy personal property total | \$83,992.80 |
| 63. Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$83,992.80 |

Official Form 106A/B Schedule A/B: Property page 6

| | Case 8.19-bk-00 | 1355-IVIGVV D(| JC T | Filed 01/10/19 | Page | : 10 01 57 |
|---------------------|--|---|--|--|--|--|
| Fil | I in this information to identify your case: | | | | | |
| De | btor 1 Christopher Michael Co | | | | | |
| Do | First Name btor 2 | Middle Name | L | ast Name | | |
| 1 | | Middle Name | L | ast Name | | |
| Un | ited States Bankruptcy Court for the: MIDE | DLE DISTRICT OF FLO | RIDA | | | |
| | se number | | | | | ☐ Check if this is an amended filing |
| Of | fficial Form 106C | | | | | |
| | chedule C: The Prope | rty You Cla | im | as Exempt | | 4/16 |
| For spe any fundexe | property you listed on Schedule A/B: Property ded, fill out and attach to this page as many ce number (if known). each item of property you claim as exempticific dollar amount as exempt. Alternatively applicable statutory limit. Some exemption ds—may be unlimited in dollar amount. Ho mption to a particular dollar amount and the provision by the the p | opies of Part 2: Addition t, you must specify th y, you may claim the f ns—such as those for wever, if you claim an | nal Pa e ame full fa r heal n exer | ount of the exemption you ir market value of the prop th aids, rights to receive conption of 100% of fair mark | claim. (erty bei ertain be ket value | additional pages, write your name and One way of doing so is to state a ng exempted up to the amount of enefits, and tax-exempt retirement e under a law that limits the |
| | he applicable statutory amount. rt 1: Identify the Property You Claim as | Exempt | | | | |
| 1. | Which set of exemptions are you claiming | • | n if yo | our spouse is filing with you. | | |
| | You are claiming state and federal nonbar | • | • | , , | | |
| | ☐ You are claiming federal exemptions. 11 | . , . | | | | |
| 2. | For any property you list on Schedule A/E | , , , | empt. | fill in the information belo | w. | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | | ount of the exemption you cla | | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemp | otion. | |
| | 2004 Honda VTX1300S 60,000 miles VIN# 1HFSC52024A103212 | \$1,000.00 | | \$1,00 | 0.00 | Fla. Stat. Ann. § 222.25(1) |
| | NADA Low Retail Value Line from Schedule A/B: 3.1 | | | 100% of fair market value, any applicable statutory lir | | |
| | Electronics: 2 TV's 50" and 32" (approx 5 yrs old), Laptop, , XBox | \$500.00 | | \$50 | 0.00 | Fla. Stat. Ann. § 222.25(4) |
| | game console Line from Schedule A/B: 7.1 | | | 100% of fair market value, any applicable statutory lir | | |
| | Firearms: Taurus G2C 9mm Handgur | 1 \$150.00 | | \$15 | 0.00 | Fla. Stat. Ann. § 222.25(4) |
| | LINE HOTH SCHEUUIE AV.D. 10.1 | | | 100% of fair market value, any applicable statutory lir | • | |
| | Clothes: clothing for self and son, | \$150.00 | | \$15 | 0.00 | Fla. Stat. Ann. § 222.25(4) |

Official Form 106C

SunTrust Acct# 1111

\$220.16

 \square 100% of fair market value, up to

any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

\$220.16

uniforms for son, work shoes/boots

Line from Schedule A/B: 11.1

Line from Schedule A/B: 17.1

Checking: Checking Account:

Fla. Stat. Ann. § 222.25(4)

| Del | otor 1 Christopher Michael Cordes | | | Case number (if known) | |
|-----|---|--|---|---|------------------------------------|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | rtion you own py the value from Check only one box for each exemption. | | Specific laws that allow exemption |
| | Savings Account: SubTrust Acct# 1145 | \$0.50 | | \$0.50 | Fla. Stat. Ann. § 222.25(4) |
| | Line from Schedule A/B: 17.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| | 423(b) Plan: Retirement: Sodium Shareworks program offered by my | \$308.00 | | \$308.00 | Fla. Stat. Ann. § 222.21(2) |
| | employer. I contribute and they match, but i can not touch the account for 2 yrs before getting vestment Line from Schedule A/B: 21.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | 401(k): Legoland Line from Schedule A/B: 21.2 | \$64.80 | | \$64.80 | Fla. Stat. Ann. § 222.21(2) |
| | Line Irom Scriedule AVB. 21.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Rent: Security Deposit: Security Deposit Held By Landlord Haven at | \$300.00 | | \$300.00 | Fla. Stat. Ann. § 222.25(4) |
| | Lake Deer Line from Schedule A/B: 22.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Federal: Anticipated 2018 Tax Refund | \$2,679.34 | | \$2,679.34 | Fla. Stat. Ann. § 222.25(4) |
| | Ente from Concade 702. 2011 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Aetna: Voluntary Life Insurance Policy #Unknown | \$70,000.00 | | \$70,000.00 | Fla. Stat. Ann. § 222.14 |
| | Policy provided through employer Beneficiary: Brayden Cordes Line from Schedule A/B: 31.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every 3 | | | led on or after the date of adjustmen | t.) |
| | ■ No | | | | |
| | Yes. Did you acquire the property covere | ed by the exemption wi | ithin 1 | ,215 days before you filed this case? |) |
| | □ No □ Yes | | | | |
| | ☐ Yes | | | | |

| Fill in this information to identify you | IF 00001 | | | |
|--|--|-----------------------------------|--|-------------------|
| Fill III this information to identify you | il case. | | | |
| Debtor 1 Christopher Mic | | | | |
| First Name | Middle Name Last Name | | | |
| Debtor 2 (Spouse if, filing) First Name | Middle Name Last Name | | - | |
| United States Bankruptcy Court for the | MIDDLE DISTRICT OF FLORIDA | | - | |
| Case number | | | | |
| (if known) | | | ☐ Check | if this is an |
| | | | amend | led filing |
| | | | | |
| Official Form 106D | | | | |
| Schedule D: Creditors | Who Have Claims Secure | d by Propert | V | 12/15 |
| | If two married people are filing together, both are e | <u> </u> | <u>-</u> | |
| | out, number the entries, and attach it to this form. C | | | |
| 1. Do any creditors have claims secured b | y your property? | | | |
| ☐ No. Check this box and submit t | his form to the court with your other schedules. | ou have nothing else t | to report on this form. | |
| Yes. Fill in all of the information | · | 9 | • | |
| | below. | | | |
| Part 1: List All Secured Claims | | Column A | Column B | Column C |
| | more than one secured claim, list the creditor separatel | у | | |
| much as possible, list the claims in alphabeti | s a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name. | Amount of claim Do not deduct the | Value of collateral that supports this | Unsecured portion |
| | oal order decorating to the ordered ordanie. | value of collateral. | claim | If any |
| 2.1 Moneylion | Describe the property that secures the claim: | \$443.09 | \$120.00 | \$323.09 |
| Creditor's Name | Financial Account: MoneyLion | | | |
| | Mobile App | | | |
| Attn: Bankruptcy Dept | Acct# 0946 As of the date you file, the claim is: Check all that | | | |
| P.O. Box 1547 | apply. | | | |
| Sandy, UT 84091 | ☐ Contingent | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| Debtor 1 only | ☐ An agreement you made (such as mortgage or se | ecured | | |
| Debtor 2 only | car loan) | | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a | ☐ Other (including a right to offset) | | | |
| community debt | | | | |
| Date debt was incurred | Last 4 digits of account number 0946 | | | |
| | | | | |
| Santander Consumer USA | Describe the property that secures the claim: | \$11,942.00 | \$7,500.00 | \$4,442.00 |
| Creditor's Name | 2014 Kia Soul+ 112000 miles | | | |
| | VIN# KNDJP3A55E7075514 | | | |
| Attn: Bankruntov | NADA Rough Value | | | |
| Attn: Bankruptcy Po Box 961245 | As of the date you file, the claim is: Check all that | | | |
| Fort Worth, TX 76161 | apply. □ Contingent | | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | |
| | ☐ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 only | ☐ An agreement you made (such as mortgage or se | ecured | | |
| Debtor 2 only | car loan) | | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a | ☐ Other (including a right to offset) | | | |
| community debt | | | | |

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| Debtor 1 | Christoph | er Michael Cordes | | Case number (if known) | | | | |
|-----------|---------------------------------------|---|-------------------------------------|------------------------|--|------------|----|--|
| | First Name | Middle Name | Last Name | | | | | |
| Date debt | was incurred | Opened 04/18 Last Active 8/23/18 | Last 4 digits of account number | 1000 | | | | |
| Add the | dollar value of | your entries in Column | A on this page. Write that number h | nere: | | \$12,385.0 |)9 | |
| | the last page of the last number here | • | llar value totals from all pages. | | | \$12,385.0 | 9 | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| | Case 0.13-1 | JK-00333-IVIGVV | DOC 1 Thed 01/10/19 Fage | 20 01 37 |
|--|--|---|---|---|
| Fill in this | s information to identify your | case: | | |
| Debtor 1 | Christopher Mich | ael Cordes | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, fili | ing) First Name | Middle Name | Last Name | |
| United Sta | ates Bankruptcy Court for the: | MIDDLE DISTRICT OF F | LORIDA | |
| Case num | ber | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| Official | Form 106E/F | | | |
| Schedi | ule E/F: Creditors W | ho Have Unsecu | red Claims | 12/15 |
| Schedule D left. Attach name and c | : Creditors Who Have Claims Sec the Continuation Page to this pag ase number (if known). | ured by Property. If more spa je. If you have no information | 6G). Do not include any creditors with partially s ice is needed, copy the Part you need, fill it out, r to report in a Part, do not file that Part. On the to | number the entries in the boxes on the |
| | List All of Your PRIORITY Un | | | |
| _ ` | r creditors have priority unsecure | d claims against you? | | |
| | Go to Part 2. | | | |
| ☐ Yes | | TV I I management Claims | | |
| | List All of Your NONPRIORIT | | | |
| _ ` | r creditors have nonpriority unsec | | | |
| ∐ No. | You have nothing to report in this p | art. Submit this form to the coul | rt with your other schedules. | |
| Yes | S. | | | |
| unsecu | red claim, list the creditor separately | y for each claim. For each claim | r of the creditor who holds each claim. If a crediton listed, identify what type of claim it is. Do not list claim fyou have more than three nonpriority unsecured claim. | ims already included in Part 1. If more |
| | | | | Total claim |
| 4.1 A | mscott | Last 4 digits | of account number | \$551.00 |
| No | onpriority Creditor's Name | Whon was the | e debt incurred? | |
| | FL 00009-9999 | Wilen was the | e dest incurred : | |
| | umber Street City State Zlp Code | As of the date | e you file, the claim is: Check all that apply | |
| W | ho incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | t . | |
| | Debtor 2 only | ☐ Unliquidate | ed | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and and | Julioi | PRIORITY unsecured claim: | |
| | Check if this claim is for a comr | | | |
| | ebt the claim subject to offset? | ☐ Obligations report as priori | s arising out of a separation agreement or divorce the ity claims | at you did not |
| | No | | ension or profit-sharing plans, and other similar debt | S |
| | l Yes | Other Spe | cify \$500 cash advance | |
| | | о оро | · / | |

| Debtor | Christopher Michael Cordes | | Case number (if known) | | | | |
|--------|--|--|--|------------|--|--|--|
| 4.2 | Capital One / Yamaha | Last 4 digits of account number | 8218 | \$0.00 | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 | When was the debt incurred? | Opened 05/12 Last Active 04/16 | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | Yes | Other. Specify Charge Acc | count | | | | |
| 4.3 | Credit One Bank Nonpriority Creditor's Name | Last 4 digits of account number | 3197 | \$0.00 | | | |
| | Attn: Bankruptcy Po Box 98873 | When was the debt incurred? | Opened 01/16 Last Active 6/14/16 | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sena | aration agreement or divorce that you did not | | | | |
| | Is the claim subject to offset? | report as priority claims | and the second of all of the second s | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | Yes | Other. Specify Credit Card | <u> </u> | | | | |
| 4.4 | Discover Card Nonpriority Creditor's Name | Last 4 digits of account number | | \$2,300.00 | | | |
| | ., FL 00009-9999 | When was the debt incurred? | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | _ ` | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | aration agreement or divorce that you did not | | | | |
| | Is the claim subject to offset? | report as priority claims | and the state of t | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | ☐ Yes | Other Specify | | | | | |

| Debto | Christopher Michael Cordes | | Case number (if known) | |
|-------|---|--|---|-------------|
| 4.5 | Discover Financial Nonpriority Creditor's Name | Last 4 digits of account number | 2707 | \$2,088.00 |
| | Po Box 3025 New Albany, OH 43054 | When was the debt incurred? | Opened 09/12 Last Active 9/08/16 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | ☐ Yes | Other Specify Credit Card | <u> </u> | |
| 4.6 | First Access Nonpriority Creditor's Name | Last 4 digits of account number | 5615 | \$153.33 |
| | PO Box 89028 Sioux Falls, SD 57109 | When was the debt incurred? | Date Opened: 08/24/2018 Last Used: 10/23/2018 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | | it card, \$300 limit. I use this for nergencies. Trying too keep this | |
| 4.7 | Jefferson Capital Systems, LLC | Last 4 digits of account number | 9003 | \$14,488.00 |
| | Nonpriority Creditor's Name Po Box 1999 Saint Cloud, MN 56302 | When was the debt incurred? | Opened 08/15 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Factoring C | Company Account Drivetime | |

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| Debtor | 1 Christopher Michael Cordes | | Case number (if known) | | | | |
|--------|---|--|--|------------|--|--|--|
| 4.8 | Macy's Store Card | Last 4 digits of account number | | \$0.00 | | | |
| | Nonpriority Creditor's Name unknown FL 00009-9999 | When was the debt incurred? | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | Yes | Other. Specify | | | | | |
| 1.9 | Michael and Ann Joy Matison | Last 4 digits of account number | none | \$5,970.00 | | | |
| | Nonpriority Creditor's Name 206 Lakedale Dr Auburndale, FL 33823 | When was the debt incurred? | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | Yes | ■ Other. Specify | cree split the loan between my I myself. | | | | |
| l.1 | MidAmerica Bank & Trust Company | Last 4 digits of account number | 5615 | \$331.00 | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 400 Dixon, MO 65459 | When was the debt incurred? | Opened 08/18 Last Active 10/22/18 | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | ☐ Debtor 2 only | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | | | | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | | |
| | ■ No | ☐ Debts to pension or profit-sharing | | | | | |
| | Yes | Other. Specify Credit Card | <u> </u> | | | | |

| Debto | Christopher Michael Cordes | | Case number (if known) | | | | | |
|-------|---|--|--|------------|--|--|--|--|
| l.1 | Midland Funding | | 2670 | ¢000 00 | | | | |
| | Midland Funding Nonpriority Creditor's Name | Last 4 digits of account number | 3679 | \$989.00 | | | | |
| | 2365 Northside Dr Ste 300 | When was the debt incurred? | Opened 02/17 | | | | | |
| | San Diego, CA 92108 | | | | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | | | | | |
| | Who incurred the debt? Check one. | | | | | | | |
| | Debtor 1 only | | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | | | | | |
| | Yes | ■ Other. Specify Factoring (Bank N.A. | Company Account Credit One | | | | | |
| 1.1 | Moneylion Nonpriority Creditor's Name | Last 4 digits of account number | 8660 | \$443.00 | | | | |
| | Attn: Bankruptcy Dept | | Opened 9/24/18 Last Active | | | | | |
| | P.O. Box 1547 | When was the debt incurred? | 11/18 | | | | | |
| | Sandy, UT 84091 | _ | | | | | | |
| | Number Street City State ZIp Code | As of the date you file, the claim | s: Check all that apply | | | | | |
| | Who incurred the debt? Check one. | _ | | | | | | |
| | ■ Debtor 1 only □ Contingent | | | | | | | |
| | Debtor 2 only | Unliquidated | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | | | | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | | | | | | |
| | No | Debts to pension or profit-sharing | a plans, and other similar debts | | | | | |
| | | • | g plans, and other similar debts | | | | | |
| | Yes | Other. Specify Secured | | | | | | |
| 1.1 | Motolease | Last 4 digits of account number | 3567 | \$4,766.00 | | | | |
| | Nonpriority Creditor's Name | _ | 0 10/00/40 1 14 4 4 | | | | | |
| | 10866 Wilshire Blvd. Los Angeles, CA 90024 | When was the debt incurred? | Opened 3/28/16 Last Active 12/01/17 | | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | | | |
| | Who incurred the debt? Check one. | | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | |
| | debt | Obligations arising out of a sepa | ration agreement or divorce that you did not | | | | | |
| | Is the claim subject to offset? | report as priority claims | 3 | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | |
| | Yes | Other. Specify Auto Lease | • | | | | | |
| | | | | | | | | |

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| Deb | tor 1 Christopher Michael Cordes | | Case number (if known) | | | | | | |
|-----|---|---|--|--------|--|--|--|--|--|
| 4.1 | OneMain Financial | Last 4 digits of account number | | \$0.00 | | | | | |
| 4 | Nonpriority Creditor's Name | Last 4 digits of account number | | Ψ0.00 | | | | | |
| | | When was the debt incurred? | | | | | | | |
| | ., FL 00009-9999 Number Street City State Zlp Code | As of the date you file the claim | S. Chaple all that apply | | | | | | |
| | Who incurred the debt? Check one. | As of the date you file, the claim | s. Спеск ан тлат арргу | | | | | | |
| | _ | ■ Debtor 1 only □ Contingent | | | | | | | |
| | Debtor 2 only | | | | | | | | |
| | | ☐ Unliquidated | | | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | 1 claim: | | | | | | |
| | ☐ At least one of the debtors and another | Student loans | a Glaiiii. | | | | | | |
| | ☐ Check if this claim is for a community debt | <u></u> | ration agreement or divorce that you did not | | | | | | |
| | Is the claim subject to offset? | report as priority claims | nation agreement or divorce that you did not | | | | | | |
| | ■ No | ☐ Debts to pension or profit-sharing | g plans, and other similar debts | | | | | | |
| | ☐ Yes | Other. Specify | | | | | | | |
| | | — ошог. ороону | | | | | | | |
| 4.1 | l | | 244 | 40.00 | | | | | |
| 5 | OneMain Financial Nonpriority Creditor's Name | Last 4 digits of account number | <u>0111</u> | \$0.00 | | | | | |
| | Attn: Bankruptcy | | Opened 1/15/13 Last Active | | | | | | |
| | 601 Nw 2nd Street | When was the debt incurred? | 2/28/14 | | | | | | |
| | Evansville, IN 47708 | | | | | | | | |
| | Number Street City State ZIp Code | As of the date you file, the claim | is: Check all that apply | | | | | | |
| | Who incurred the debt? Check one. | | | | | | | | |
| | ■ Debtor 1 only | Contingent | | | | | | | |
| | Debtor 2 only | Unliquidated | | | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | | | | | |
| | Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | | | | | | |
| | ■ No | Debts to pension or profit-sharir | g plans, and other similar debts | | | | | | |
| | ☐ Yes | Other. Specify Note Loan | | | | | | | |
| | _ 100 | Other. Specify | | | | | | | |
| 4.1 | | | | | | | | | |
| 6 | OneMain Financial | Last 4 digits of account number | 9184 | \$0.00 | | | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy | | Opened 12/22/11 Last Active | | | | | | |
| | Po Box 3251 | When was the debt incurred? | 1/15/13 | | | | | | |
| | Evansville, IN 47731 | _ | | | | | | | |
| | Number Street City State ZIp Code | As of the date you file, the claim | s: Check all that apply | | | | | | |
| | Who incurred the debt? Check one. | _ | | | | | | | |
| | Debtor 1 only | Contingent | | | | | | | |
| | Debtor 2 only | Unliquidated | | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | | | |
| | ☐ Check if this claim is for a community | Student loans | | | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | | | |
| | No | Debts to pension or profit-sharing plans, and other similar debts | | | | | | | |
| | | · | | | | | | | |
| | ☐ Yes | Other. Specify Unsecured | | | | | | | |

| Debto | Christopher Michael Cordes | | Case number (if known) | | | | |
|-------|--|---|---|--------|--|--|--|
| 4.1 | OneMain Financial | Last 4 digits of account number | 7220 | \$0.00 | | | |
| 7 | Nonpriority Creditor's Name | Last 4 digits of account number | | Ψ0.00 | | | |
| | Attn: Bankruptcy | | Opened 9/22/11 Last Active | | | | |
| | Po Box 3251 | When was the debt incurred? | 12/22/11 | | | | |
| | Evansville, IN 47731 Number Street City State Zlp Code | As of the date you file, the claim i | | | | | |
| | Who incurred the debt? Check one. | | or one on an anal appry | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt | Obligations arising out of a sepa | ration agreement or divorce that you did not | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | Yes | Other. Specify Unsecured | | | | | |
| 4.1 | OneMain Financial | | 6339 | \$0.00 | | | |
| 8 | Nonpriority Creditor's Name | Last 4 digits of account number | | \$0.00 | | | |
| | Attn: Bankruptcy | | Opened 8/04/11 Last Active | | | | |
| | Po Box 3251 | When was the debt incurred? | 9/22/11 | | | | |
| | Evansville, IN 47731 Number Street City State Zlp Code | | or Object, all that are he | | | | |
| | Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | | | |
| | Debtor 1 only | Пол | | | | | |
| | _ ' | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | 1 alaim. | | | | |
| | At least one of the debtors and another | Student loans | d Claim. | | | | |
| | ☐ Check if this claim is for a community debt | _ | and the second and the second | | | | |
| | Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | | | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | |
| | Yes | ■ Other Specify Unsecured | | | | | |
| 4.1 | | | | | | | |
| 9 | OneMain Financial Nonpriority Creditor's Name | Last 4 digits of account number | 8672 | \$0.00 | | | |
| | Attn: Bankruptcy | | Opened 01/13 Last Active | | | | |
| | Po Box 3251 | When was the debt incurred? | 9/30/14 | | | | |
| | Evansville, IN 47731 Number Street City State Zlp Code | As of the date you file, the claim i | s. Chack all that anniv | | | | |
| | Who incurred the debt? Check one. | As of the date you me, the dam's | 3. Oncok all that apply | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | ′ | ☐ Disputed | | | | | |
| | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | |
| | _ | | | | | | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | | | | |
| | Is the claim subject to offset? | report as priority claims | adion agreement of divorce that you did not | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | □Yes | ■ Other. Specify Unsecured | | | | | |
| | | - Other Speeding | | | | | |

Official Form 106 E/F

| 1 Christopher Michael Cordes | | Case number (if known) | |
|--|--|---|------------|
| OneMain Financial | Last 4 digits of account number | 7634 | \$0.00 |
| Nonpriority Creditor's Name Attn: Bankruptcy 601 Nw 2nd Street | When was the debt incurred? | Opened 11/13 Last Active 2/16/14 | , |
| Evansville, IN 47708 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| ☐ Yes | Other. Specify Note Loan | | |
| Orbit Leasing, Inc. | Last 4 digits of account number | 0535 | \$2,023.00 |
| Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9534 | When was the debt incurred? | Opened 4/04/15 Last Active 4/29/16 | |
| Wyoming, MI 49509 Number Street City State ZIp Code | As of the date you file, the claim | | |
| Who incurred the debt? Check one. | _ | | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | L. L. C. | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | d claim: | |
| ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | nation agreement of divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| ☐ Yes | Other. Specify Auto Lease | 1 | |
| Publix Employees Fed C | Last 4 digits of account number | 0201 | \$0.00 |
| Nonpriority Creditor's Name | | | |
| P O Box 1000 Lakeland, FL 33802 | When was the debt incurred? | Opened 04/11 Last Active 2/06/18 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharin | | |
| ∏ yes | Other Specify Check Cred | lit Or Line Of Credit | |

| Debt | or 1 Christopher Michael Cordes | | Case number (if known) | |
|----------|--|--|--|------------|
| 4.2 | Resurgent Capital Services | Last 4 digits of account number | 7634 | \$927.00 |
| | Nonpriority Creditor's Name Po Box 10587 | When was the debt incurred? | Opened 06/15 | |
| | Greenville, SC 29603 Number Street City State Zlp Code | As of the date you file, the claim | | |
| | Who incurred the debt? Check one. | | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sep report as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-shari | ng plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Financial S | Company Account Springleaf Services | |
| 4.2 4 | Sprint | Last 4 digits of account number | | \$990.00 |
| | Nonpriority Creditor's Name | When was the debt incurred? | | |
| | ., FL 00009-9999 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | _ | | |
| | Debtor 1 only | Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community debt | Student loans | | |
| | Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-shari | ng plans, and other similar debts | |
| | Yes | Other. Specify Old cell ph | | |
| 4.2 | Syncb/suzuki Installme | Last 4 digits of account number | 6608 | \$3,719.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 | When was the debt incurred? | Opened 05/12 Last Active 4/16/14 | |
| | Orlando, FL 32896 Number Street City State Zlp Code | As of the date you file, the claim | ie. Chock all that apply | |
| | Who incurred the debt? Check one. | As of the date you me, the dam | 13. Official and appropriate appropriate and appropriate and appropriate appro | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sep report as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-shari | ng plans, and other similar debts | |
| | ☐ Yes | Other. Specify Secured | | |

| Visa | a Dent S | tore National | | | | |
|--|---|--|---|---|--|--|
| | ık/Macy' | | Last 4 digits of account number | 9411 | | \$275.0 |
| Nonpi | oriority Cred | litor's Name | _ | | _ | |
| | า: Bankr Box 805 | | When we the debt incomed? | Opened 12, 4/26/13 | 11 Last Active | |
| | son, OH | ~ | When was the debt incurred? | 4/20/13 | | |
| | | City State Zlp Code | As of the date you file, the claim | s: Check all that | apply | |
| Who | incurred t | he debt? Check one. | | | | |
| ■ De | ebtor 1 onl | у | ☐ Contingent | | | |
| □ D€ | ebtor 2 onl | у | ☐ Unliquidated | | | |
| □ D€ | ebtor 1 and | d Debtor 2 only | ☐ Disputed | | | |
| ☐ At | t least one | of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| □ cı | heck if thi | s claim is for a community | ☐ Student loans | | | |
| debt | | - | Obligations arising out of a sepa | ration agreement | or divorce that you did no | ot |
| _ | | bject to offset? | report as priority claims | | | |
| ■ No | lo | | ☐ Debts to pension or profit-sharing | • | r similar debts | |
| ☐ Ye | es | | ■ Other. Specify Charge Acc | count | | |
| se this pag trying to dave more the otified for a | ge only if y collect fro than one c any debts | m you for a debt you owe to so reditor for any of the debts that in Parts 1 or 2, do not fill out o | bout your bankruptcy, for a debt that y meone else, list the original creditor in t you listed in Parts 1 or 2, list the addi r submit this page. On which entry in Part 1 or Part 2 did you | Parts 1 or 2, the tional creditors | en list the collection age nere. If you do not have editor? | ency here. Similarly, if yo additional persons to be |
| se this pag s trying to d lave more the lotified for a me and Add AS LaVra 33 S. Uni | ge only if y collect fro than one c any debts dress | ou have others to be notified a m you for a debt you owe to so reditor for any of the debts tha in Parts 1 or 2, do not fill out o | bout your bankruptcy, for a debt that y meone else, list the original creditor in to you listed in Parts 1 or 2, list the addir submit this page. On which entry in Part 1 or Part 2 did you Line 4.5 of (Check one): | Parts 1 or 2, the tional creditors list the original creditors Part 1: Creditors | en list the collection age nere. If you do not have editor? with Priority Unsecured (| ency here. Similarly, if you additional persons to be Claims |
| se this pag s trying to d ave more the lotified for a me and Add AS LaVra 33 S. United | ge only if y collect fro than one c any debts dress ar niversity | ou have others to be notified a m you for a debt you owe to so reditor for any of the debts that in Parts 1 or 2, do not fill out o | bout your bankruptcy, for a debt that y meone else, list the original creditor in to you listed in Parts 1 or 2, list the addir submit this page. On which entry in Part 1 or Part 2 did you Line 4.5 of (Check one): | Parts 1 or 2, the tional creditors list the original creditors Part 1: Creditors | en list the collection age nere. If you do not have editor? | ency here. Similarly, if you additional persons to be Claims |
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| se this page trying to cave more the otified for a me and Add S LaVra 33 S. Unid Floor rt Laude | ge only if y collect fro than one c any debts dress ar niversity erdale, F dd the Ar mounts of ecured cla | ou have others to be notified a m you for a debt you owe to so reditor for any of the debts that in Parts 1 or 2, do not fill out o Drive L 33324 mounts for Each Type of Uncertain types of unsecured claim. | bout your bankruptcy, for a debt that y meone else, list the original creditor in you listed in Parts 1 or 2, list the addir submit this page. On which entry in Part 1 or Part 2 did you Line 4.5 of (Check one): | Parts 1 or 2, the tional creditors list the original or Part 1: Creditors Part 2: Creditors 2224 eporting purpos | en list the collection age nere. If you do not have editor? with Priority Unsecured (swith Nonpriority Unsecured eswith Nonpriority | ency here. Similarly, if you additional persons to be claims red Claims Add the amounts for eac |
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| se this page trying to cave more the otified for a me and Add S LaVra 33 S. Unid Floor rt Laude | ge only if y collect fro than one c any debts dress ar niversity erdale, F | ou have others to be notified a m you for a debt you owe to so reditor for any of the debts that in Parts 1 or 2, do not fill out o Drive L 33324 Mounts for Each Type of Uncertain types of unsecured claim. Domestic support obligations Taxes and certain other debts Claims for death or personal in Other. Add all other priority uns | bout your bankruptcy, for a debt that y meone else, list the original creditor in a you listed in Parts 1 or 2, list the addir r submit this page. On which entry in Part 1 or Part 2 did you Line 4.5 of (Check one): | Parts 1 or 2, the tional creditors list the original creditors Part 1: Creditors Part 2: Creditors 2224 Peporting purpos 6a. \$ 6b. \$ 6c. \$ 6d. | en list the collection age nere. If you do not have editor? swith Priority Unsecured Community Unsecured | ency here. Similarly, if you additional persons to be additional persons to be claims Claims Add the amounts for each occurred to |
| se this pages trying to converted and Add AS LaVra 33 S. Unid Floor and Laude and Action | ge only if y collect fro than one c any debts dress ar niversity erdale, F | ou have others to be notified a m you for a debt you owe to so reditor for any of the debts that in Parts 1 or 2, do not fill out o Drive L 33324 mounts for Each Type of Uncertain types of unsecured claim. Domestic support obligations Taxes and certain other debts Claims for death or personal | bout your bankruptcy, for a debt that y meone else, list the original creditor in a you listed in Parts 1 or 2, list the addir r submit this page. On which entry in Part 1 or Part 2 did you Line 4.5 of (Check one): | Parts 1 or 2, the tional creditors list the original or 1 Part 1: Creditors 2224 eporting purpos 6a. \$ 6b. \$ 6c. \$ | en list the collection age nere. If you do not have editor? swith Priority Unsecured Community Unsecured | ency here. Similarly, if you additional persons to be additional persons to be claims red Claims Add the amounts for eac 00 00 00 00 00 00 00 00 00 00 00 00 00 |
| se this pages trying to cave more the otified for a me and Add AS LaVra 33 S. Unid Floor ort Laude | ge only if y collect fro than one c any debts dress ar niversity erdale, F | ou have others to be notified a m you for a debt you owe to so reditor for any of the debts that in Parts 1 or 2, do not fill out o Drive L 33324 Mounts for Each Type of Uncertain types of unsecured claim. Domestic support obligations Taxes and certain other debts Claims for death or personal in Other. Add all other priority uns | bout your bankruptcy, for a debt that y meone else, list the original creditor in a you listed in Parts 1 or 2, list the addir r submit this page. On which entry in Part 1 or Part 2 did you Line 4.5 of (Check one): | Parts 1 or 2, the tional creditors list the original creditors Part 1: Creditors Part 2: Creditors 2224 Peporting purpos 6a. \$ 6b. \$ 6c. \$ 6d. | en list the collection age nere. If you do not have editor? swith Priority Unsecured Community Unsecured | ency here. Similarly, if you additional persons to be additional persons to be claims Claims Add the amounts for each oo |

from Part 2

6g.

6h.

6i.

here.

6g.

6h.

6i.

6j.

Obligations arising out of a separation agreement or divorce that you did not report as priority claims
Debts to pension or profit-sharing plans, and other similar debts

Other. Add all other nonpriority unsecured claims. Write that amount

Total Nonpriority. Add lines 6f through 6i.

0.00

0.00

40,013.33

40,013.33

| Fill in this infor | rmation to identify your | case: | | |
|---------------------|--------------------------|--------------------|-----------|--|
| Debtor 1 | Christopher Mich | ael Cordes | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | MIDDLE DISTRICT OF | FLORIDA | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Р | erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|-----|--|---|
| 2.1 | Haven at Lake Deer 350 24th St NW Winter Haven, FL 33880 | 1 Bed, 1 Bathroom, Ground Level Apt. Basic features, Unreserved Parking Lot Spaces |
| 2.2 | INPRTO Florida, LLC 256 W. Data Drive Draper, UT 84020 | Lease # 12070002 Mattress Firm (Bed Frame and Pillows) |

Case 8:19-bk-00355-MGW Doc 1 Filed 01/16/19 Page 31 of 57

| | Case 0.13-1 | JK-00333-IVIG VV | DOC 1 THEU 01 | 110/19 Page | 31 01 37 |
|---------------------------------|---|-------------------------------|---------------------------|--|---|
| Fill in this infe | ormation to identify your | case: | | | |
| Debtor 1 | Christopher Mich | | | | |
| Dobtor 2 | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the: | MIDDLE DISTRICT OF | FLORIDA | | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an amended filing |
| | form 106H | • | | | |
| Schedul | e H: Your Cod | ebtors | | | 12/15 |
| ☐ No ■ Yes 2. Within | the last 8 years, have you | lived in a community pr | operty state or territory | ? (Community proper | ty states and territories include |
| ■ No. Go □ Yes. Di | to line 3. d your spouse, former spou | use, or legal equivalent live | e with you at the time? | | |
| in line 2 a | igain as a codebtor only i D), Schedule E/F (Official | f that person is a guaran | ntor or cosigner. Make s | ure you have listed t | ng with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fil |
| | umn 1: Your codebtor e, Number, Street, City, State and ZI | P Code | | Column 2: The cr Check all schedul | editor to whom you owe the debt es that apply: |
| 184 | an Torpey Avey Drive ourndale, FL 33823 | | | ☐ Schedule D, I☐ Schedule E/F☐ Schedule G☐ Haven at Lake | f, line 2.1 |

| Fill | in this information to identify your c | ase: | | | | ļ | | | | |
|--------------------|---|-------------------------------|---|----------------|---------------|----------------------|-----------------------|---------------------------|----------------------------------|-----------------|
| Del | btor 1 Christopher | Michael Cordes | | | | | | | | |
| | btor 2 puse, if filing) | | | | _ | | | | | |
| Uni | ited States Bankruptcy Court for the | e: MIDDLE DISTRICT O | F FLORIDA | | _ | | | | | |
| | se number nown) | | | | | □ Ai | | ed filing ent showing | g postpetition ollowing date: | |
| 0 | fficial Form 106l | | | | | M | M / DD/ Y | /YYY | | |
| S | chedule I: Your Inc | ome | | | | | ,, | | | 12/1 |
| sup spo atta | as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment | are married and not filing wi | ng jointly, and your ith you, do not inclu | spouse i | s liv nati | ing with on about | you, incl your spe | ude inforn ouse. If mo | nation about ore space is | your needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | | Debtor 2 | 2 or non-fi | ling spouse | |
| | If you have more than one job, | F | ■ Employed | | | | ☐ Employed | | | |
| | attach a separate page with information about additional | Employment status | ☐ Not employed | ☐ Not employed | | | | ☐ Not employed | | |
| | employers. | Occupation | Entertainment F | yrotec | hnic | ian | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | LEGOLAND Flo | rida | | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 1 Legoland Way Winter Haven, F | | 4 | | | | | |
| | | How long employed to | here? 2 Years | s, 11 Mc | nth | s | _ | | | |
| Pa | ct 2: Give Details About Mo | nthly Income | | | | | | | | |
| | mate monthly income as of the duse unless you are separated. | ate you file this form. If | you have nothing to r | eport for | any | line, write | \$0 in the | space. Inc | clude your no | n-filing |
| • | ou or your non-filing spouse have mee space, attach a separate sheet to | | ombine the informatio | n for all e | empl | oyers for | that perso | on on the lir | nes below. If | you need |
| | | | | | | For Deb | otor 1 | | otor 2 or ng spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. | \$ | 3, | 499.38 | \$ | N/A | |
| 3. | Estimate and list monthly over | time pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | |
| 4. | Calculate gross Income. Add li | ne 2 + line 3. | | 4. | \$ | 3,49 | 9.38 | \$ | N/A | |

| Deb | otor 1 | Christopher Michael Cordes | _ | | Case | e number (if known) | | | | |
|-----|-------------------|---|----------|-----------|-------------------|----------------------|---------------------|--------------------------|-------------------|-----------------|
| | | | | | Fo | r Debtor 1 | | r Debtor : n-filing s | | |
| | Cop | y line 4 here | 4. | • | \$_ | 3,499.38 | \$_ | | N/A | - |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5 | a. | \$ | 309.94 | \$ | | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 51 | b. | \$ | 0.00 | \$ | | N/A | - |
| | 5c. | Voluntary contributions for retirement plans | 50 | c. | \$ | 174.98 | \$ | | N/A | - |
| | 5d. | Required repayments of retirement fund loans | 50 | d. | \$_ | 0.00 | \$_ | | N/A | - |
| | 5e. | Insurance | | e. | \$_ | 106.73 | \$_ | | N/A | - |
| | 5f. | Domestic support obligations | 5f | | \$_ | 0.00 | \$_ | | N/A | - |
| | 5g. 5h. | Union dues Other deductions Specific Shareague | 5g | g. h.+ | \$_ \$ | 0.00 | + \$ | | N/A N/A | - |
| | on. | Other deductions. Specify: Sharesave Allstate Accident | _ 31 | 11.+ | -\$ - | 30.01 14.52 | + \$_ \$ | | N/A N/A | - |
| • | A .1.1 | | | | · - | | · - | | | - |
| 6. | | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$_ | 636.18 | \$_ | | N/A | - |
| 7. | Cald | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | • | \$ __ | 2,863.20 | \$_ | | N/A | |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8: | a. | \$ | 0.00 | \$ | | N/A | |
| | 8b. | Interest and dividends | | b. | \$- | 0.00 | \$- | | N/A | - |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | | с. | \$_ | 0.00 | *_ \$ | | N/A | = |
| | 8d. | Unemployment compensation | 80 | d. | \$ | 0.00 | \$ | | N/A | - |
| | 8e. | Social Security | 86 | e. | \$ | 0.00 | \$ | - | N/A | - |
| | 8f. 8g. 8h. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify: | 81 89 | | \$_ \$_ \$_ | 0.00 0.00 0.00 | \$_ \$_ + \$_ | | N/A N/A N/A | - - |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | — 9. | | \$ | 0.00 | \$ | | N/A | |
| - | | | | | | | <u> </u> | | | <u> </u> |
| 10. | | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$_ | | 2,863.20 + \$ | | N/A | = \$ | 2,863.20 |
| 11. | Inclu othe | e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: | dep | | | • | - | | | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailes | | | | | | e. 12. | \$ | 2,863.20 |
| 13. | Doy | ou expect an increase or decrease within the year after you file this form | ? | | | | | | Combir | ned y income |
| | | No. Yes. Explain: | | | | | | | | |

Official Form 106I Schedule I: Your Income page 2

| EHIL | in this informe | tion to identify yo | our caea: | | | • | | | | |
|--|--|--|-------------------------------------|--|--|------------------------|--|---|--|--|
| | | tion to identify yo | our case. | | | | | | | |
| Debtor 1 Christopher Michael Cordes | | | | Cordes | | Chec | | | | |
| Deb | otor 2 | | | | | _ | An amended filing A supplement shov | ving postpetition chapter | | |
| (Spo | ouse, if filing) | | | | | _ ′ | 13 expenses as of | the following date: | | |
| United States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA | | | | | | MM / DD / YYYY | | | | |
| | e number nown) | | | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | | | |
| So | chedule | J: Your | Exper | nses | | | | 12/15 | | |
| Be | as complete a ormation. If m mber (if know | and accurate as | possible eded, atta y questio | . If two married people a | | | | | | |
| 1. | Is this a joir | | iloiu | | | | | | | |
| | ■ No. Go to | | · | eta hausahald? | | | | | | |
| | ⊔ res. Doe | | ın a separ | ate household? | | | | | | |
| | = | _ | st file Offici | al Form 106J-2, Expense | es for Separate House | e <i>hold</i> of Debte | or 2. | | | |
| 2 | | | _ | | | | | | | |
| 2. | • | e dependents? | ☐ No | - | Daniel de la colonia | | D L U . | Barra Barra Barra | | |
| | Do not list D Debtor 2. | ebtor 1 and | Yes. | Fill out this information for each dependent | Dependent's related Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? | | |
| | Do not state | the | | | _ | | | □ No | | |
| | dependents | names. | | | Son | | 12 | Yes | | |
| | | | | | | | | □ No □ Yes | | |
| | | | | | | | | □ res □ No | | |
| | | | | | | | | ☐ Yes | | |
| | | | | | | | | □ No | | |
| | | | | | | | | ☐ Yes | | |
| 3. | expenses o | penses include f people other t d your depende | han $_{oldsymbol{\sqcap}}$ | No Yes | | | | | | |
| Par | | ate Your Ongoi | | · . | | | | | | |
| exp | | | | uptcy filing date unless y is filed. If this is a sup | | | | pter 13 case to report f the form and fill in the | | |
| | | | | government assistance cluded it on <i>Schedule I:</i> | | | | | | |
| (Off | ficial Form 10 | 6I.) | | | | _ | Your expe | enses | | |
| 4. | | or home owners | | ses for your residence. | Include first mortgag | e 4. \$ | | 650.00 | | |
| | If not include | led in line 4: | | | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. \$ | | 0.00 | | |
| | | rty, homeowner's | s, or renter | 's insurance | | 4b. \$ | | 20.00 | | |
| | | • | • | ıpkeep expenses | | 4c. \$ | | 0.00 | | |
| | 4d. Home | owner's associat | ion or con | dominium dues | | 4d. \$ | | 0.00 | | |
| 5. | Additional mortgage payments for your residence, such as home equity loans | | | | | 5. \$ | | 0.00 | | |

| ebtor 1 | Christopher Michael Cordes | Case num | ber (if known) | |
|----------------------|---|--|----------------|---|
| Utilitie | s: | | | |
| 6a. E | Electricity, heat, natural gas | 6a. | \$ | 125.00 |
| | Vater, sewer, garbage collection | 6b. | \$ | |
| | elephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | |
| | Other. Specify: | 6d. | · | |
| | nd housekeeping supplies | — 7. | · | |
| | are and children's education costs | 8. | \$ | |
| | | 9. | \$ | |
| | ng, laundry, and dry cleaning | | · | |
| | al care products and services | 10. | · · · | |
| | Il and dental expenses | 11. | \$ | 20.00 |
| | ortation. Include gas, maintenance, bus or train fare. | 12. | ф | 250.00 |
| | include car payments. | | · | |
| | inment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | |
| | able contributions and religious donations | 14. | \$ | 0.00 |
| . Insura | | | | |
| | include insurance deducted from your pay or included in lines 4 or 20. | | _ | |
| | ife insurance | 15a. | | 0.00 |
| 15b. F | lealth insurance | 15b. | \$ | |
| 15c. \ | /ehicle insurance | 15c. | \$ | 175.33 |
| 15d. C | Other insurance. Specify: Motorcycle Insurance | 15d. | \$ | 125.00 70.00 170.00 170.00 0.00 400.00 120.00 120.00 250.00 75.00 0.00 0.00 175.33 25.00 0.00 308.19 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0 |
| | Do not include taxes deducted from your pay or included in lines 4 or 20. | | | |
| Specify | | 16. | \$ | 0.00 |
| | nent or lease payments: | | · - | |
| | Car payments for Vehicle 1 | 17a. | \$ | 70.00 170.00 170.00 0.00 400.00 240.00 120.00 100.00 250.00 75.00 0.00 0.00 175.33 25.00 0.00 308.19 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0 |
| | Car payments for Vehicle 2 | 17b. | · - | |
| | Other Charles | 17c. | · <u> </u> | |
| | Other. Specify: | 17d. | | |
| | ayments of alimony, maintenance, and support that you did not report as | | Ψ | 0.00 |
| | ed from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). | | \$ | 0.00 |
| | payments you make to support others who do not live with you. | | \$ | |
| Specify | • | 19. | <u> </u> | 0.00 |
| | eal property expenses not included in lines 4 or 5 of this form or on School | | our Income | |
| | Nortgages on other property | 20a. | | 0.00 |
| | Real estate taxes | | | |
| | | | | |
| | Property, homeowner's, or renter's insurance | | | |
| | Maintenance, repair, and upkeep expenses | | | |
| | lomeowner's association or condominium dues | 20e. | \$ | 0.00 |
| . Other: | Specify: Streaming Subscriptions | 21. | +\$ | 40.00 |
| Gym I | /lembership | | +\$ | 33.00 |
| | rder Box Subscriptions | | +\$ | |
| - | • | | | |
| | ate your monthly expenses | | | |
| | dd lines 4 through 21. | | \$ | 2,891.52 |
| 22b. Co | ppy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | 20b. \$ 0.0 cs insurance 20c. \$ 0.0 cs insurance 20d. \$ | | |
| 22c. Ac | ld line 22a and 22b. The result is your monthly expenses. | | \$ | 0.00 0.00 0.00 0.00 0.00 0.00 40.00 33.00 70.00 2,891.52 |
| | | | · — | |
| . Calcula | ate your monthly net income. | | | |
| 23a. C | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 2,863.20 |
| | Copy your monthly expenses from line 22c above. | 23b. | -\$ | |
| | • | | | _, |
| 23c. S | Subtract your monthly expenses from your monthly income. | | | |
| | The result is your monthly net income. | 23c. | \$ | -28.32 |
| For exar modifica | expect an increase or decrease in your expenses within the year after you nple, do you expect to finish paying for your car loan within the year or do you expect you tion to the terms of your mortgage? | | | e or decrease because o |
| | | | | |
| No. | | | | |

| Fill in this informa | ation to identify your | case: | | | | | | | | |
|---------------------------------|---|------------------------|----------------|-------------------------|---------------|--|----|--|--|--|
| Debtor 1 | Christopher Mich | | | | | | | | | |
| | First Name | Middle Name | Las | t Name | | | | | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Las | t Name | | | | | | |
| United States Banl | kruptcy Court for the: | MIDDLE DISTRICT | OF FLORIDA | | | | | | | |
| Case number(if known) | | | | | | ☐ Check if this is an amended filing | | | | |
| Official Form Declarati | | an Individua | al Debte | or's Sched | ules | 12/ | 15 | | | |
| years, or both. 18 | or property by fraud i U.S.C. §§ 152, 1341, 7 Below | | ankruptcy cas | e can result in fines i | up to \$250,0 | 00, or imprisonment for up to 20 | D | | | |
| Did you pay | or agree to pay some | one who is NOT an at | torney to help | you fill out bankrupt | cy forms? | | | | | |
| ■ No | | | | | | | | | | |
| ☐ Yes. Na | ame of person | | | | | nch Bankruptcy Petition Preparer's Notice, Claration, and Signature (Official Form 119) | | | | |
| | y of perjury, I declare true and correct. | that I have read the s | ummary and s | chedules filed with th | nis declarati | on and | | | | |
| X /s/ Chris | stopher Michael Co | rdes | Х | | | | | | | |
| | oher Michael Corde of Debtor 1 | es | | Signature of Debtor 2 | 2 | | | | | |
| Date <u>Ja</u> | nuary 16, 2019 | | | Date | | | | | | |

| Fill in this info | umotion to identify you | | | | | | |
|--|---|--|---|--|---|--|--|
| | rmation to identify you | | | | | | |
| Debtor 1 | Christopher Mic First Name | Chael Cordes Middle Name | Last Name | | | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | | | |
| | | | | | | | |
| United States E | Bankruptcy Court for the | : MIDDLE DISTRICT OF FI | LORIDA | | | | |
| Case number (if known) | | | | _ | Check if this is an mended filing | | |
| Official Fo | | Affairs for Individ | duals Filing for B | ankruptcy | 4/10 | | |
| information. If | | sible. If two married people a l, attach a separate sheet to t estion. | | | | | |
| Part 1: Give | Details About Your M | arital Status and Where You | Lived Before | | | | |
| 1. What is yo | our current marital stat | us? | | | | | |
| ☐ Marrie | ed | | | | | | |
| ■ Not m | arried | | | | | | |
| 2. During the | e last 3 years, have you | ı lived anywhere other than v | where you live now? | | | | |
| □ No | | | | | | | |
| | ist all of the places you | lived in the last 3 years. Do no | ot include where you live nov | I. | | | |
| Debtor 1 | Prior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ac | ldress: | Dates Debtor 2 lived there | | |
| 2538 Do Lakeland | ns PI d, FL 33801 | From-To: 7/2015 - 11/20 | ☐ Same as Debtor | 1 | ☐ Same as Debtor 1 From-To: | | |
| No Yes. No Expl Part 2 Expl 4. Did you ha Fill in the to If you are fi | Make sure you fill out So lain the Sources of You ave any income from e | ever live with a spouse or legalifornia, Idaho, Louisiana, Newschedule H: Your Codebtors (Of ur Income mployment or from operating ou received from all jobs and au have income that you received | vada, New Mexico, Puerto R ficial Form 106H). g a business during this yould businesses, including part | ico, Texas, Washington and V | visconsin.) | | |
| □ No ■ Yes. F | Fill in the details. | | | | | | |
| | | Debtor 1 | | Debtor 2 | | | |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | |
| For last calend (January 1 to I | dar year: December 31, 2018) | ■ Wages, commissions, bonuses, tips | \$35,036.52 | ☐ Wages, commissions, bonuses, tips | | | |
| | | ☐ Operating a business | | ☐ Operating a business | | | |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| Christopher Michael C | Cordes | Cas | e number (if known) | |
|--|---|---|--|---|
| | | | | |
| | Debtor 1 | | Debtor 2 | |
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| For the calendar year before that: (January 1 to December 31, 2017) | ■ Wages, commissions, bonuses, tips | \$33,115.00 | ☐ Wages, commissions, bonuses, tips | |
| | ☐ Operating a business | | ☐ Operating a business | |
| For the calendar year: (January 1 to December 31, 2016) | ■ Wages, commissions, bonuses, tips | \$31,566.00 | ☐ Wages, commissions, bonuses, tips | |
| | ☐ Operating a business | | ☐ Operating a business | |
| winnings. If you are filing a joint call List each source and the gross in the No Yes. Fill in the details. | | - | | |
| | Debtor 1 Sources of income | Gross income from | Debtor 2 Sources of income | Gross income |
| | Describe below. | each source (before deductions and exclusions) | Describe below. | (before deductions and exclusions) |
| For the calendar year before that: (January 1 to December 31, 2017) | Federal Tax Return | \$4,578.00 | | |
| For the calendar year: (January 1 to December 31, 2016) | Tax Refund | \$4,609.00 | | |
| Part 3: List Certain Payments Yo | u Made Before You Filed for | Bankruptcy | | |
| | 2's debts primarily consume Debtor 2 has primarily consu a personal, family, or househo | umer debts. Consumer debts | s are defined in 11 U.S.C. § 1 | 01(8) as "incurred by an |
| During the 90 days be ☐ No. Go to line | fore you filed for bankruptcy, di | id you pay any creditor a tota | I of \$6,425* or more? | |
| paid that o | reach creditor to whom you par creditor. Do not include paymer | nts for domestic support oblig | | |
| | e payments to an attorney for to nt on 4/01/19 and every 3 year | | or after the date of adjustmen | nt. |
| | or both have primarily consu fore you filed for bankruptcy, di | | I of \$600 or more? | |
| ■ No. Go to line | 7. | | | |
| include pa | each creditor to whom you par syments for domestic support o or this bankruptcy case. | | | |
| Creditor's Name and Address | Dates of payme | ent Total amount | Amount you Was this still owe | payment for |

Case number (if known)

| l. c | Vithin 1 year before you filed for bankrupt insiders include your relatives; any general part if which you are an officer, director, person in business you operate as a sole proprietor. 1 limony. | artners; relatives of any ger a control, or owner of 20% of | neral partners; partners partners or more of their voting | erships of which g securities; and | you are a gener any managing | ral partner; corporation agent, including one fo |
|------------------|---|--|---|--|---|---|
| [| □ No | | | | | |
| I | Yes. List all payments to an insider. | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still ow | | r this payment |
| | Ann Joy Matison 206 Lakedale Dr auburndale, FL 33823 | every other week | \$1,100.00 | \$5,970.00 | | a personal loan as ivorce agreement. |
| i | Within 1 year before you filed for bankrupt nsider? nclude payments on debts guaranteed or cos | | ments or transfer a | any property o | n account of a c | debt that benefited an |
| į | No | | | | | |
| _ | Yes. List all payments to an insider Insider's Name and Address | Dates of payment | Total amount | Amount you | | r this payment |
| | | | para | Still OW | include cre | and 3 name |
| | • | | | | | |
| i | No ■ Yes. Fill in the details. | | | | | |
| Ī | | Nature of the case | Court or agency | | Status of t | he case |
| | Yes. Fill in the details. Case title | Nature of the case Civil | Court or agency Tenth Judicial 255 N. Broadw Bartow, FL 338 | Circuit ay Ave. | Status of t | g eal |
| | Yes. Fill in the details. Case title Case number Discover v. Christopher Michael Cordes | | Tenth Judicial 255 N. Broadw | Circuit ay Ave. | ■ Pending □ On app □ Conclud Writ of ga against m bank acce | g leal ded arnishment filed ny Wells Fargo ount. Drained it, rent payment from |
| | Yes. Fill in the details. Case title Case number Discover v. Christopher Michael Cordes | | Tenth Judicial 255 N. Broadw | Circuit ay Ave. 330 ircuit Court adway Ave. | Pending On app Conclud Writ of ga against m bank accutook my r it, and fro | g leal leal ded arnishment filed ny Wells Fargo ount. Drained it, rent payment from oze it. g leal |
| - | Yes. Fill in the details. Case title Case number Discover v. Christopher Michael Cordes 2015SC-002224 Alton W Kelley vs Christopher Michael Cordes 15CC-005079 | Civil FORCIBLE ENTRY/DETAINER | Polk County C 255 North Broadw Bartow, FL 338 | Circuit ay Ave. 330 ircuit Court adway Ave. 330 | Pending On app Conclud Writ of ga against m bank acce took my r it, and fro | g leal ded arnishment filed arny Wells Fargo ount. Drained it, rent payment from oze it. g leal ded |
| - 0. V | Yes. Fill in the details. Case title Case number Discover v. Christopher Michael Cordes 2015SC-002224 Alton W Kelley vs Christopher Michael Cordes | Civil FORCIBLE ENTRY/DETAINER | Polk County C 255 North Broadw Bartow, FL 338 | Circuit ay Ave. 330 ircuit Court adway Ave. 330 | Pending On app Conclud Writ of ga against m bank acce took my r it, and fro | g leal ded arnishment filed arny Wells Fargo ount. Drained it, rent payment from oze it. g leal ded |
| - 0. V | Yes. Fill in the details. Case title Case number Discover v. Christopher Michael Cordes 2015SC-002224 Alton W Kelley vs Christopher Michael Cordes 15CC-005079 Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo | Civil FORCIBLE ENTRY/DETAINER | Polk County C 255 North Broadw Bartow, FL 338 | Circuit ay Ave. 330 ircuit Court adway Ave. 330 | Pending On app Conclud Writ of ga against m bank acce took my r it, and fro | g leal ded arnishment filed arny Wells Fargo ount. Drained it, rent payment from oze it. g leal ded |
| - 0. V | Yes. Fill in the details. Case title Case number Discover v. Christopher Michael Cordes 2015SC-002224 Alton W Kelley vs Christopher Michael Cordes 15CC-005079 Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below. | FORCIBLE ENTRY/DETAINER | Polk County C 255 North Broadw Bartow, FL 338 | Circuit ay Ave. 330 ircuit Court adway Ave. 330 | Pending On app Conclud Writ of ga against m bank acce took my r it, and fro | g leal ded arnishment filed my Wells Fargo ount. Drained it, rent payment from oze it. g leal ded ded, seized, or levied? |
| - 0. V | Yes. Fill in the details. Case title Case number Discover v. Christopher Michael Cordes 2015SC-002224 Alton W Kelley vs Christopher Michael Cordes 15CC-005079 Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo | Civil FORCIBLE ENTRY/DETAINER | Polk County C 255 North Broadw Bartow, FL 338 | Circuit ay Ave. 330 ircuit Court adway Ave. 330 | Pending On app Conclud Writ of ga against m bank acce took my r it, and fro | g leal ded arnishment filed arny Wells Fargo ount. Drained it, rent payment from oze it. g leal ded |

Debtor 1 Christopher Michael Cordes

| Del | otor 1 Christopher Michael Cordes | Case n | umber (if known) | |
|-----|---|--|--------------------------------|--------------------------|
| | Creditor Name and Address | Describe the Property | Date | Value of the property |
| | Motolease .10866 Wilshire Blvd. | Explain what happened Motorcycle, black, 2008 Suzuki GSXR 60 | 00 9/1/17 | \$4,700.00 |
| | Ste. 565 Los Angeles, CA 90010 | ■ Property was repossessed. □ Property was foreclosed. □ Property was garnished. □ Property was attached, seized or levied. | | |
| | RAS LaVrar, LLC 1133 S. University Drive Plantation, FL 33324 | garnishment of bank account. took \$715 from account, including rent payment. | 5 10/3/2018 | \$716.44 |
| | | □ Property was repossessed.□ Property was foreclosed. | | |
| | | Property was garnished. | | |
| | | ☐ Property was attached, seized or levied. | | |
| | ■ No □ Yes. Fill in the details. Creditor Name and Address | Describe the action the creditor took | Date action was taken | Amount |
| 12. | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes | tcy, was any of your property in the possession another official? | of an assignee for the bene | fit of creditors, a |
| Par | t 5: List Certain Gifts and Contributions | | | |
| 13. | Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift. | otcy, did you give any gifts with a total value of i | more than \$600 per person? | , |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | Person to Whom You Gave the Gift and Address: | | | |
| 14. | Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift or cor | otcy, did you give any gifts or contributions with | n a total value of more than S | \$600 to any charity? |
| | Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | tal Describe what you contributed | Dates you contributed | Value |
| Par | t 6: List Certain Losses | | | |
| 15. | Within 1 year before you filed for bankrupt or gambling? | cy or since you filed for bankruptcy, did you los | se anything because of thef | t, fire, other disaster, |
| | ■ No □ Yes. Fill in the details. | | | |
| | Describe the property you lost and | Describe any insurance coverage for the loss | Date of your | Value of property |

Official Form 107

how the loss occurred

Include the amount that insurance has paid. List pending insurance claims on line 33 of *Schedule A/B: Property*.

lost

loss

| Del | btor 1 | Christopher Michael Cordes | C | ase number (if known) | |
|-----|--------------|---|--|--|----------------------|
| | | | | | |
| Pa | rt 7: | List Certain Payments or Transfers | | | |
| 16. | consi | n 1 year before you filed for bankruptcy, culted about seeking bankruptcy or preparde any attorneys, bankruptcy petition prepare | ing a bankruptcy petition? | | |
| | | No | | | |
| | | Yes. Fill in the details. | | | |
| | Addı Ema | on Who Was Paid ress il or website address on Who Made the Payment, if Not You | Description and value of any prope transferred | rty Date payment or transfer was made | Amount o paymen |
| | 703 | dvising Washington Ave. City, MI 48708 | PreFiling Credit Counseling Co | urse 10/19/18 | \$9.96 |
| | P.O. Win | Wilson Advocacy Group, P.A. . Box 3142 ter Haven, FL 33885 @wilsonadvocacygroup.com | Filing Fee | 11/1/18 | \$110.00 |
| 17. | Do no | n 1 year before you filed for bankruptcy, on ised to help you deal with your creditors of the include any payment or transfer that you lise No. Yes. Fill in the details. | or to make payments to your creditors | | erty to anyone who |
| | Pers Addı | on Who Was Paid ress | Description and value of any prope transferred | rty Date payment or transfer was made | Amount o paymen |
| | PO I | ncial education services Box 417 nington, MI 48332 | | 8/19/2019, 9/19/2019 | \$178.00 |
| 18. | Includinclud | n 2 years before you filed for bankruptcy, ferred in the ordinary course of your buside both outright transfers and transfers made le gifts and transfers that you have already liston. No Yes. Fill in the details. | ness or financial affairs? as security (such as the granting of a se | curity interest or mortgage on you Describe any property or | |
| | Addı | ress con's relationship to you | property transferred | payments received or debts paid in exchange | made |
| 19. | Within benef | n 10 years before you filed for bankruptcy ficiary? (These are often called asset-protect No Yes. Fill in the details. | | lf-settled trust or similar device | e of which you are a |
| | | e of trust | Description and value of the proper | rty transforred | Date Transfer was |
| | IVAIII | o or must | Description and value of the proper | ty dansierieu | made |
| | | | | | |

Debtor 1 Christopher Michael Cordes

Case number (if known)

| Pai | t 8: List of Certain Financial Accounts, In | struments, Safe Depos | it Boxes, and Sto | orage Units | 5 | | |
|--|--|--|----------------------------|-------------|--|---|--|
| Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, clo sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, broke houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. | | | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account instrument | int or | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer | |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had ac Address (Number, State and ZIP Code) | | Describe t | the contents | Do you still have it? | |
| 22. | Have you stored property in a storage unit | or place other than you | ır home within 1 | year before | e you filed for bankruptcy | ? | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or to it? Address (Number, State and ZIP Code) | | Describe t | the contents | Do you still have it? | |
| Pa | t 9: Identify Property You Hold or Control | for Someone Else | | | | | |
| 23. | Do you hold or control any property that so for someone. | meone else owns? Inc | lude any propert | y you borr | owed from, are storing fo | r, or hold in trust | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the pro (Number, Street, City, Code) | | Describe t | the property | Value | |
| Pa | t 10: Give Details About Environmental Inf | ormation | | | | | |
| For | the purpose of Part 10, the following definiti | ons apply: | | | | | |
| | Environmental law means any federal, state toxic substances, wastes, or material into t regulations controlling the cleanup of these | he air, land, soil, surfac | e water, ground | • . | | | |
| | Site means any location, facility, or propert to own, operate, or utilize it, including dispersion. | | environmental la | aw, whethe | er you now own, operate, | or utilize it or used | |
| | Hazardous material means anything an env hazardous material, pollutant, contaminant | | as a hazardous | waste, haz | zardous substance, toxic | substance, | |
| Rep | ort all notices, releases, and proceedings th | at you know about, reg | ardless of when | they occu | rred. | | |
| 24. | Has any governmental unit notified you tha | t you may be liable or p | ootentially liable | under or ir | n violation of an environm | ental law? | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental un Address (Number, ZIP Code) | | | nmental law, if you it | Date of notice | |

Case number (if known)

| 25. | 5. Have you notified any governmental unit of any release of hazardous material? | | | | | | |
|-------|--|---|------------------------------|--|--------------------|--|--|
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | | Environmental law, if you know it | Date of notice | | |
| 26. | Have you been a party in any judicial or adn | ninistrative proceeding under any envi | ronn | nental law? Include settlements a | and orders. | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nat | ure of the case | Status of the case | | |
| Par | 11: Give Details About Your Business or | Connections to Any Business | | | | | |
| 27. | Within 4 years before you filed for bankrupt | cy, did you own a business or have an | y of | the following connections to any | business? | | |
| | ■ A sole proprietor or self-employed in | n a trade, profession, or other activity, | eithe | er full-time or part-time | | | |
| | ☐ A member of a limited liability comp | any (LLC) or limited liability partnershi | ip (Ll | LP) | | | |
| | ☐ A partner in a partnership | | | | | | |
| | ☐ An officer, director, or managing ex | ecutive of a corporation | | | | | |
| | ☐ An owner of at least 5% of the voting | g or equity securities of a corporation | | | | | |
| | No. None of the above applies. Go to Part 12. | | | | | | |
| | ■ Yes. Check all that apply above and fill in the details below for each business. | | | | | | |
| | Business Name Describe the nature of the business Employer Identification number | | | | | | |
| | Address (Number, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | | Do not include Social Security number or ITIN. Dates business existed | | | |
| | Chris Cordes Consulting 360 24th St NW Winter Haven, FL 33880 | Consulting for live audio needs for churches, ministries, and youth groups. | EIN: From-To 7/1/2015-Preser | | | | |
| | Willer Havell, I L 33000 | | | | | | |
| | | Myself | | | | | |
| 28. | Within 2 years before you filed for bankrupt institutions, creditors, or other parties. | cy, did you give a financial statement t | o an | yone about your business? Inclu | ude all financial | | |
| | ■ No | | | | | | |
| | Yes. Fill in the details below. | | | | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | | | | | | |
| Par | 12: Sign Below | | | | | | |
| are t | re read the answers on this <i>Statement of Fin</i> rue and correct. I understand that making a a bankruptcy case can result in fines up to s.S.C. §§ 152, 1341, 1519, and 3571. | false statement, concealing property, o | or ob | otaining money or property by fra | | | |
| Ch | Christopher Michael Cordes ristopher Michael Cordes nature of Debtor 1 | Signature of Debtor 2 | | | | | |
| Dat | e January 16, 2019 | Date | | | | | |
| Did | ou attach additional pages to Your Stateme | ent of Financial Affairs for Individuals F | iling | for Bankruptcy (Official Form 1 | 07)? | | |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

Best Case Bankruptcy

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| Debtor 1 | Christopher Michael Cordes | Case number (if known) | |
|------------|--|--|--|
| | | | |
| _ | | | |
| ■ No | | | |
| ☐ Yes | | | |
| Did you no | y or agree to pay someone who is not an attorney to help you fill out | nankruptov forme? | |
| | ly or agree to pay someone who is not an attorney to help you hill out | Dankrupicy forms? | |
| ■ No | | | |
| ☐ Yes. Nar | me of Person . Attach the Bankruptcy Petition Preparer's Notice, De | eclaration, and Signature (Official Form 119). | |

| Debtor 1 Debtor 2 (Spouse if, filing) | Christopher Micha First Name | ael Cordes Middle Name | Last Name | | |
|--|---------------------------------|-----------------------------|--|--------------------------|------------------------------------|
| | | Middle Name | Last Name | | |
| | First Name | | | | |
| (Spouse if, filing) | First Name | | | | |
| | | Middle Name | Last Name | | |
| United States Bank | ruptcy Court for the: | MIDDLE DISTRICT OF | FLORIDA | | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an amended filing |
| If you are an indivi | dual filing under chap | oter 7, you must fill out t | his form if: | | |
| creditors have c | laims secured by you | ır property, or | | | |
| You must file this f | orm with the court wi | | ired. le your bankruptcy petition or b for cause. You must also send | | |
| on the for | 111 | | | | |
| on the for If two married peop | | in a joint case, both are | equally responsible for supply | ing correct information. | Both debtors must |

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
|---|---|---|
| Creditor's Moneylion | ■ Surrender the property. | □No |
| name: | ☐ Retain the property and redeem it. | <u>_</u> |
| Description of Financial Account: MoneyLion | Retain the property and enter into a Reaffirmation Agreement. | ■ Yes |
| property Mobile App securing debt: Acct# 0946 | ☐ Retain the property and [explain]: | |
| Creditor's Santander Consumer USA name: | ☐ Surrender the property. ☐ Retain the property and redeem it. | □ No |
| Description of 2014 Kia Soul+ 112000 miles | Retain the property and enter into a Reaffirmation Agreement. | ■ Yes |
| property securing debt: VIN# KNDJP3A55E7075514 NADA Rough Value | ☐ Retain the property and [explain]: | |

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

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| Deb | otor 1 <u>C</u> | hristoph | er Michael Cordes | Case number (if known) | |
|-----|-----------------------|---------------------|---|--|-------------------------------|
| Les | sor's nam | ie: | Haven at Lake Deer | | □ No |
| | | | | | Yes |
| | scription o perty: | f leased | 1 Bed, 1 Bathroom, Ground Lot Spaces | Level Apt. Basic features, Unreserved Parking | |
| Les | sor's nam | ie: | INPRTO Florida, LLC | | ■ No |
| | | | | | ☐ Yes |
| | scription o perty: | f leased | Lease # 12070002 Mattress Firm (Bed Frame a | and Pillows) | |
| Par | t 3: Sig | n Below | | | |
| | | | ry, I declare that I have indicated t to an unexpired lease. | d my intention about any property of my estate that se | cures a debt and any personal |
| Χ | /s/ Chri | istopher | Michael Cordes | X | |
| | | opher Mire of Debto | chael Cordes or 1 | Signature of Debtor 2 | |
| | Date | Januar | ry 16, 2019 | Date | |

| Fill in this info | ormation to identify your case: | | Ch | ock one k | ooy only as d | irected in this form and | d in Form |
|--|---|--|---|--------------------------|---------------------------------|--|-----------------------------------|
| Debtor 1 | Christopher Michael Cordes | | | 2A-1Supp | | irected iii tiiis loilii and | i iii FOIIII |
| Debtor 2 | | | | ■ 1 The | re is no nres | umption of abuse | |
| (Spouse, if filing) | | | | | · | o determine if a presu | motion of abuse |
| United States | s Bankruptcy Court for the: Middle District of I | -lorida | ' | app | olies will be n | nade under <i>Chapter 7</i> | • |
| Case numbe | er | | | | , | icial Form 122A-2). | |
| (if known) | | | | | | does not apply now be service but it could ap | |
| | | | | ☐ Chec | k if this is a | n amended filing | |
| Official | <u>Form 122A - 1</u> | | | | | | |
| Chapte | r 7 Statement of Your Cur | rent Mor | nthly Inc | ome | | | 12/1 |
| attach a separ case number (qualifying mili | te and accurate as possible. If two married people at the sheet to this form. Include the line number to vif known). If you believe that you are exempted fro tary service, complete and file Statement of Exempted Calculate Your Current Monthly Income | which the additior m a presumption otion from Presum | nal information a of abuse becau | applies. O | n the top of a not have prir | ny additional pages, wri narily consumer debts o | te your name and or because of |
| _ | s your marital and filing status? Check one or | ıly. | | | | | |
| | married. Fill out Column A, lines 2-11. | | | | | | |
| | ried and your spouse is filing with you. Fill or | | | 2-11. | | | |
| | ried and your spouse is NOT filing with you. | • | • | | 15.11 | | |
| _ | iving in the same household and are not lega | | | | | | |
| р | iving separately or are legally separated. Fill enalty of perjury that you and your spouse are lead on the common of the evading apart for reasons that do not include evading apart for reasons that do not include evading the common of the | egally separated | d under nonban | kruptcy la | aw that applie | es or that you and you | |
| 101(10A). F the 6 month | average monthly income that you received from all For example, if you are filing on September 15, the 6-mns, add the income for all 6 months and divide the total on the same rental property, put the income from that p | onth period would by 6. Fill in the res | l be March 1 throi sult. Do not includ | ugh Augus de any inco | t 31. If the amo | ount of your monthly incor ore than once. For examp | ne varied during ble, if both |
| | | | | Column Debtor | | Column B Debtor 2 or non-filing spouse | |
| | ross wages, salary, tips, bonuses, overtime, deductions). | and commission | ons (before all | \$ | 2,890.86 | \$ | |
| 3. Alimon | y and maintenance payments. Do not include a B is filled in. | payments from | a spouse if | \$ | 0.00 | \$ | |
| of you from an and roo | ounts from any source which are regularly pa or your dependents, including child support a unmarried partner, members of your household ammates. Include regular contributions from a sp b. Do not include payments you listed on line 3. | . Include regular d, your depende | r contributions nts, parents, | \$ | 0.00 | \$ | |
| | ome from operating a business, profession, | or farm | | — | | | |
| | | | otor 1 | | | | |
| Gross r | eceipts (before all deductions) | \$ | | | | | |
| | y and necessary operating expenses | -\$ 0.00 | | • | 0.00 | | |
| | nthly income from a business, profession, or far | m \$0.00_ | Copy here -> | • • —— | 0.00 | \$ | |
| 6. Net inc | ome from rental and other real property | Deh | otor 1 | | | | |
| Gross r | eceipts (before all deductions) | \$ 0.00 | | | | | |
| | y and necessary operating expenses | -\$ 0.00 | | | | | |
| | nthly income from rental or other real property | \$ 0.00 | Copy here -> | \$ | 0.00 | \$ | |
| 7. Interes | t, dividends, and royalties | | | \$ | 0.00 | \$ | |

Official Form 122A-1

| Debto | r 1 <u>C</u> | hristopher Michael Cordes | | | Case number | er (if known) | | | | |
|-------|-------------------|---|--|-------------|-------------------|---------------|---------------------|-------|----------|-----------------|
| | | | | | Column A Debtor 1 | | Column B Debtor 2 c | | ouse | |
| 8. | Unem | ployment compensation | | | \$ | 0.00 | \$ | | | |
| | Do not | enter the amount if you contend that the amoun cial Security Act. Instead, list it here: | t received was a benef | fit under | | | | | | |
| | For | you\$ | 0. | 00 | | | | | | |
| | For | your spouse\$ | | | | | | | | |
| 9. | Pensi | on or retirement income. Do not include any an tunder the Social Security Act. | nount received that wa | is a | \$ | 0.00 | \$ | | | |
| 10. | Do not receive | e from all other sources not listed above. Spet include any benefits received under the Social Sed as a victim of a war crime, a crime against hurstic terrorism. If necessary, list other sources on a elow. | Security Act or paymer manity, or international | nts I or | | | | | | |
| | | · | | | \$ | 0.00 | \$ | | | |
| | | | | | \$ | 0.00 | \$ | | | |
| | | Total amounts from separate pages, if any. | | + | \$ | 0.00 | \$ | | | |
| 11. | | late your total current monthly income. Add lincolumn. Then add the total for Column A to the to | | \$ | 2,890.86 | + \$_ | | = | \$ | 2,890.86 |
| | | | | | | | | | Total | current monthly |
| Part | 2. | Determine Whether the Means Test Applies t | o Vou | | | | | | incon | ne |
| гап | ۷. | Determine whether the Means Test Applies t | o rou | | | | | | | |
| 12. | Calcu | late your current monthly income for the year | . Follow these steps: | | | | | | | |
| | 12a. C | copy your total current monthly income from line | 11 | | Сор | y line 11 | here=> | \$ | ; | 2,890.86 |
| | | | | | | | | | | |
| | N | fultiply by 12 (the number of months in a year) | | | | | | | | 12 |
| | 12b. T | he result is your annual income for this part of th | e form | | | | 121 | b. \$ | <u> </u> | 34,690.32 |
| 13. | Calcul | late the median family income that applies to | you. Follow these ster | os: | | | | | | |
| | | he state in which you live. | FL | | | | | | | |
| | | ne state in which you live. | | | | | | | | |
| | Fill in t | he number of people in your household. | 2 | | | | | | | |
| | Fill in t | he median family income for your state and size | of household. | | | | 13. | . \$ | 6 | 58,960.00 |
| | | d a list of applicable median income amounts, go s form. This list may also be available at the bank | online using the link s | | | | | | | |
| 4.4 | | • | rupicy cierk's office. | | | | | | | |
| 14. | 14a. | Io the lines compare?Line 12b is less than or equal to line 13. O | n the ten of nego 1 oh | ook boy | 1 Thorois | no progun | antion of obje | 00 | | |
| | 1 4 a. | Go to Part 3. | if the top of page 1, cr | IECK DOX | . I, THERE IS | no presun | ірион от авиз | se. | | |
| | 14b. | Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2. | of page 1, check box 2 | , The pr | esumption o | f abuse is | determined b | y Fo | orm 1 | 22A-2. |
| Part | 3: | Sign Below | | | | | | | | |
| | | y signing here, I declare under penalty of perjury | that the information o | n this sta | atement and | in any att | achments is t | true | and (| correct. |
| | v | /c/ Christopher Michael Cordes | | | | • | | | | |
| | ^ | /s/ Christopher Michael Cordes Christopher Michael Cordes Signature of Debtor 1 | | | | | | | | |
| | Date | January 16, 2019 MM / DD / YYYY | | | | | | | | |
| | If | you checked line 14a, do NOT fill out or file Forr | n 122A-2. | | | | | | | |
| | | you checked line 14b, fill out Form 122A-2 and f | | | | | | | | |

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 07/01/2018 to 12/31/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Legoland Florida

Income by Month:

| 6 Months Ago: | 07/2018 | \$2,705.14 |
|---------------|--------------------|------------|
| 5 Months Ago: | 08/2018 | \$2,523.92 |
| 4 Months Ago: | 09/2018 | \$2,534.38 |
| 3 Months Ago: | 10/2018 | \$2,918.39 |
| 2 Months Ago: | 11/2018 | \$2,494.20 |
| Last Month: | 12/2018 | \$4,169.10 |
| | Average per month: | \$2,890.86 |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|---------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| <u>+</u> \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| · | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Middle District of Florida

| In re Christopher Michael Cordes | Debtor(s) | Case No. Chapter | 7 | | | | |
|--|--------------------------------|------------------|---|--|--|--|--|
| VERIFICATION OF CREDITOR MATRIX | | | | | | | |
| The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge. | | | | | | | |
| Date: January 16, 2019 | /s/ Christopher Michael Cordes | | | | | | |
| | Signature of Debtor | | | | | | |

Haven at Lake Deer Christopher Michael Cordes Motolease 360 24th St NW Apt 631 350 24th St NW 10866 Wilshire Blvd. Winter Haven, FL 33880 Winter Haven, FL 33880 Los Angeles, CA 90024 David Wilson IV INPRTO Florida, LLC OneMain Financial The Wilson Advocacy Group, P.A. 256 W. Data Drive P.O. Box 3142 Draper, UT 84020 ., FL 00009-9999 Winter Haven, FL 33885 Amanda Cordes Jefferson Capital Systems, LLC OneMain Financial 303 Cordova Rd Po Box 1999 Attn: Bankruptcy Auburndale, FL 33823 Saint Cloud, MN 56302 601 Nw 2nd Street Evansville, IN 47708 Amscott Macy's Store Card OneMain Financial unknown Attn: Bankruptcy Po Box 3251 ., FL 00009-9999 ., FL 00009-9999 Evansville, IN 47731 Capital One / Yamaha Michael and Ann Joy Matison OneMain Financial Attn: Bankruptcy 206 Lakedale Dr Attn: Bankruptcy Po Box 30285 Auburndale, FL 33823 Po Box 3251 Salt Lake City, UT 84130 Evansville, IN 47731 Credit One Bank OneMain Financial MidAmerica Bank & Trust Company Attn: Bankruptcy Attn: Bankruptcy Attn: Bankruptcy Po Box 98873 Po Box 400 Po Box 3251 Las Vegas, NV 89193 Dixon, MO 65459 Evansville, IN 47731 Discover Card Midland Funding OneMain Financial 2365 Northside Dr Ste 300 Attn: Bankruptcy San Diego, CA 92108 Po Box 3251 ., FL 00009-9999 Evansville, IN 47731 Discover Financial Moneylion OneMain Financial Attn: Bankruptcy Dept Po Box 3025 Attn: Bankruptcy P.O. Box 1547 601 Nw 2nd Street New Albany, OH 43054 Sandy, UT 84091 Evansville, IN 47708

Moneylion

P.O. Box 1547

Sandy, UT 84091

Attn: Bankruptcy Dept

Orbit Leasing, Inc.

Wyoming, MI 49509

Attn: Bankruptcy

Po Box 9534

First Access

PO Box 89028

Sioux Falls, SD 57109

Publix Employees Fed C P O Box 1000 Lakeland, FL 33802

RAS LaVrar 1133 S. University Drive 2nd Floor Fort Lauderdale, FL 33324

Resurgent Capital Services Po Box 10587 Greenville, SC 29603

Santander Consumer USA Attn: Bankruptcy Po Box 961245 Fort Worth, TX 76161

Sean Torpey 184 Avey Drive Auburndale, FL 33823

Sprint

., FL 00009-9999

Syncb/suzuki Installme Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Visa Dept Store National Bank/Macy's Attn: Bankruptcy Po Box 8053 Mason, OH 45040 Case 8:19-bk-00355-MGW Doc 1 Filed 01/16/19 Page 57 of 57

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Middle District of Florida

| In r | e Christopher Michael Cordes | | Case No | 0. | |
|------|--|---|--|------------------------|--------------------|
| | | Debtor(s) | Chapter | 7 | |
| | DISCLOSURE OF COMPE | NSATION OF ATTO | RNEY FOR I | DEBTOR(S) | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of | g of the petition in bankruptcy | , or agreed to be pa | aid to me, for service | |
| | For legal services, I have agreed to accept | | \$ | 945.00 | |
| | Prior to the filing of this statement I have received | | \$ | 0.00 | |
| | Balance Due | | \$ | 945.00 | |
| 2. | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 3. | The source of compensation to be paid to me is: | | | | |
| | ☐ Debtor ☐ Other (specify): ARAG | Legal Insurance | | | |
| 4. | ■ I have not agreed to share the above-disclosed comp | ensation with any other person | unless they are me | embers and associate | es of my law firm. |
| | ☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the nar | | | | ny law firm. A |
| 5. | In return for the above-disclosed fee, I have agreed to re | nder legal service for all aspec | ts of the bankruptc | y case, including: | |
| | a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credite d. [Other provisions as needed] Exemption planning; Occaisionally schedules coverage counsel to attend any hearing | ement of affairs and plan which ors and confirmation hearing, a eduling conflicts exist whe | n may be required; nd any adjourned h | nearings thereof; | |
| б. | By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding, prepara Negotiations with secured creditors to r USC 522(f)(2)(A) for avoidance of liens of | schargeability actions, jud ation and filing of reaffirm educe to market value; pro | cial lien avoida | ts and application | ns as needed; |
| | | CERTIFICATION | | | |
| this | I certify that the foregoing is a complete statement of any bankruptcy proceeding. | y agreement or arrangement for | payment to me for | r representation of t | he debtor(s) in |
| _ | January 16, 2019 | /s/ David Wilson | | | |
| Ì | Date | David Wilson IV Signature of Attorna | | | |
| | | The Wilson Advo | • | ۹. | |
| | | P.O. Box 3142 Winter Haven, Fl | 22885 | | |
| | | 8634018155 Fax | | | |
| | | info@wilsonadve | | 1 | |
| | | Name of law firm | | | |